HEALTH HAPPENS IN NEIGHBORHOODS

The Greater Kansas City LISC Special Initiative Grant:
Impacts of Community Development Investments on Resident Health
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A growing body of national research supports the premise that geography is a central indicator to the health of a community and the individuals who live there. Neighborhoods with high proportions of low-income individuals and families suffer disproportionately higher rates of health disparities, housing insecurity, lower educational attainment and increased likelihood of being victimized by violent crime.

In 2008, the Robert Wood Johnson Foundation convened the Commission to Build a Healthier America. As part of its work, it examined health disparities in cities, including Kansas City, Missouri, and found that a child born in the Armour Hills neighborhood (zip code 64113) will have the average life expectancy of 83 years, while one born only three miles away in the NeighborhoodsNOW focus area of Blue Hills (zip code 64130), will live to only 69. Over the past ten years, things have not gotten better.

In 2012, Greater Kansas City LISC hired researchers from the Office of Community Health Research at the Kansas City University of Medicine and Biosciences to evaluate how our NeighborhoodsNOW program promotes physical activities conducive to improving health indicators. The resulting study, which compared two NeighborhoodsNOW communities with two control groups, found that 47% of the goals identified in the neighborhood’s Quality of Life Plans were “pro-physical activity”.

NeighborhoodsNOW progress reports indicated that 37.4% of these goals were implemented one year following the development of the Quality of Life Plans.

This data confirmed that intentional, place-based revitalization programs can create an environment conducive to healthy behaviors, and therefore have the potential to improve health indicators of residents. It remains mostly unknown whether residents react to this improved infrastructure by actually changing their behavior.

After nearly 40 years in the field, LISC has a deep understanding of the correlation between resident cohesion and efficacy and the resilience of that neighborhood. More and more research is also emerging that clearly extrapolates the relationships between health, resident connectedness and their feelings about their environment. When positive, families walk more, depend on neighbors in emergencies, and advocate for resources like parks, fresh food and safe streets. In Kansas City, we call that Resident Pride, and we invest time and money in it every day.

In 2017, LISC reached a billion dollar milestone for its investments across the country specifically for building the capacity of neighborhood organizations and community development corporations (CDCs) to improve the ways residents and neighborhood leaders work together and ultimately build that pride one feels for their home, their neighbor and their streets.
As a result of this previous research and the growing recognition nationwide that improving the social determinants of health has a greater impact on indicators than access to traditional health services, Greater Kansas City LISC embarked upon two years of community engagement and research to reveal more specifically how residents of low-income neighborhoods in Kansas City are feeling about where they live and how they interact with health-related assets.

Funded by the Health Forward Foundation and the Hall Family Foundation, we believe that the data and conclusions you read in the subsequent reports are very directional to assist community development practitioners, residents and investors strengthen their commitments in people and places so that lifestyles improve and lifetimes expand.

In addition to our funders, we are grateful for the other partnerships we deepened as a result of this scope of work. Collaborating with the health departments of Kansas City, MO and Wyandotte County was especially inspiring, particularly as a reflection of their own aspirations to find opportunities to co-create on impacting health outcomes.

We learned a lot from our experience with the NeighborWorks Success Measures team who brought a high level of credibility to our primary data collection and navigated the dynamics of managing five different neighborhood organizations in building their capacity to conduct in-person interviews with neighbors.
We are thankful for the time, dedication and energy of the community residents who participated in the research, provided feedback and ensured that the resulting report will be a useful, living document that will guide their future revitalization efforts. Finally, our hats off to the Dotte Agency and their passion for community engagement and commitment to producing not only a compelling report, but providing maps and tools that will enable residents to put the data to use as they move forward in their work to create healthy, livable neighborhoods.

We hope you will read this report and be inspired to action. Each of the neighborhoods engaged in this study have identified priority health issues and impact areas. Now comes the hard work of mobilizing neighbors, investors and policymakers to rally the resources and political will to make change. Together, over time, we can build a ‘culture of health’ and achieve health equity across our region.

Ina Anderson, Deputy Director
Acknowledgments

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Douglass-Sumner Neighborhood Association
Downtown Shareholders
Blue Hills Community Services
Blue Hills Neighborhood Association
Ivanhoe Neighborhood Council
Scarritt Renaissance Neighborhood Association

We also would like to thank the numerous partners that came together to contribute to this study and development of the report by providing strategic advice, creating the participatory events, developing the maps and the tools, conducting and analyzing research and collecting data.

University of Kansas, School of Architecture and Design:
Prof. Shannon Criss, Associate Professor (Dotte Agency)
Matt Kleinmann, Doctoral Student (Dotte Agency)

with assistance from:
Dr. Hui Cai, Assistant Professor
Maddie Hughes, Architecture Studies student
Jessie Jacobe, Masters of Architecture student
Lingling Li, Doctoral student

Kansas City, Missouri Health Department:
Dr. Sarah Martin, Deputy Director

Wyandotte County Health Department:
Wesley McKain, Healthy Communities Wyandotte Coordinator

Neighborworks America, Success Measures:
Becky Sherbloom

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Executive Summary

This report reflects the work of over two years of research by Greater Kansas City Local Initiatives Support Corporation (LISC) to understand the impact of community development investments, both physical and programmatic, on the quality of life and resident health in the five neighborhoods within LISC’s NeighborhoodsNOW geographic focus areas in Kansas City, Missouri, and Kansas City, Kansas.

The aim of this research was to gain an understanding of systemic barriers to healthy neighborhoods, to identify neighborhood health assets and their value, and to foster resident voice and collaboration with the long term goal of building stronger, more cohesive neighborhoods with improved access to healthy eating and active living. The subsequent report and tools are intended to be both an accessible resource for neighborhood residents and organizations, as well as a guide for future collaboration between LISC, their partnering neighborhood organizations and investors seeking to achieve long-term outcomes from data-driven, high impact community investments and new advocacy and policy initiatives that result in healthier communities.

The study was conducted in several phases and completed with the support of funding from the Hall Family Foundation and the Health Forward Foundation. The research was undertaken in partnership with NeighborWorks America, resident leaders and community volunteers, and the Dotte Agency design studio of the University of Kansas. Technical assistance, advising and research analysis were provided by the Kansas City, Missouri Health Department.

Phase I included primary data collection from a door-to-door community survey utilizing NeighborWorks America’s Success Measures Data System to measure resident pride in response to questions related to feelings around home ownership, access to services, safety, neighborhood connections, and a resident’s ability to change or improve their community. Between October 2016 and June 2017, 465 surveys were collected across 5 neighborhoods including Blue Hills, Ivanhoe and Scarritt Renaissance in Kansas City, MO and Douglass-Sumner and Downtown Kansas City, KS.

Community members were engaged in defining the survey area, developing survey questions and trained in survey data collection. Despite best efforts, data collection proved challenging due to a variety of factors including survey length, flexibility of data collection systems and an underestimation of the effort required by groups without prior experience with this type of data collection.

Ultimately, 3 of the 5 NeighborhoodsNOW communities collected enough data to make meaningful conclusions regarding the levels of resident pride in their neighborhoods and one, Downtown KCK, was able to obtain a true random sample. The survey results for Ivanhoe, while not representative, along with the data from Downtown Kansas City, Kansas, provide insight into the perceptions of many people in these 3 neighborhoods.

It was discovered that many people feel connected to their neighbors, feel that their community has improved and expressed confidence that it will improve in the future. A majority of respondents in each community expressed a willingness to work with others in the community. People generally feel their neighbors are friendly. The vast majority of respondents indicated they would continue to live in their neighborhood if they have the choice (See Appendix A: Neighborhood Pride Evaluation Project Synopsis).

The Kansas City, Missouri Health Department further analyzed the survey data to examine measures of Social Capital and feelings of safety in order to identify neighborhood-level predictors of cohesiveness and connectedness. They used straightforward multivariate regression techniques to assess the statistical significance of neighborhood services and amenities, as well as respondent demographics, in predicting their outcomes and only present findings with low odds of being a random relationship. While determinants of why people choose to stay or leave a neighborhood, and what they do for that neighborhood while they live in it, are complicated, they found clear patterns across these three neighborhoods that show:
People care about community spaces: parks, playgrounds, community centers, restaurants and coffee shops. Neighborhoods cannot feel integrated without welcoming, safe places to connect.

Looks do matter. Cleanliness, sanitation and infrastructure repair is connected to overall feelings of safety, connection and satisfaction. Healthy, peaceful neighborhoods begin with attention to environmental design, public works and code enforcement. Recent research from the Health Department shows that neighborhoods in KCMO with high Social Capital have fewer code enforcement complaints, even when controlling for median income or age of housing stock.

Engagement needs to evolve: The traditional models of community engagement are being replaced with innovative ways of meeting neighborhoods where they are. When neighborhoods have agency and residents feel as if their time and energy spent on civic participation matters, the payoff in terms of Social Capital can be huge. (Full statistical analysis and findings by Deputy Director Dr. Sarah Martin are included in the Appendix B: Resident Pride, Social Capital and Community Health).

In Phase II, LISC engaged the Dotte Agency- a Wyandotte County community design studio from the University of Kansas, School of Architecture and Design - to conduct outreach to build upon the survey data through direct community engagement and observation. Each neighborhood’s Quality of Life Plan – their blueprint for neighborhood revitalization- was reviewed to understand existing neighborhood priorities, assets and previous community development investments.

Dotte Agency researchers then met with multiple residents and stakeholders repeatedly over the course of a year, attending neighborhood association meetings, events, and walking the neighborhoods. Through this engagement they gained input to create maps of community assets that impact resident health, and to prioritize health issues on which to take action. The bulk of this report contains context-specific priority health issues and recommendations for each neighborhood. Recommendations for action are based on a literature review of best and current practices from the field.

Phase III included street level walk audits of specific geographic nodes chosen by community members as areas of focus. The Dotte Agency created an audit tool specifically for this purpose and engaged community members in the audits. Results from the audits provide additional data to support and guide future community action to improve health that may include infrastructure, programmatic or policy approaches. It is likely that this report will need to adapt as neighborhood circumstances change and new public health research is made available. For this reason, maps and audit tools are provided so that resident leaders can take part in identifying and measuring outcomes in the future. (Full results of walk audits for each neighborhood are provided in the Neighborhood Audit Summary and Appendix C: LISC Neighborhood Audit Tool).

**PRIORITY HEALTH ISSUES: IVANHOE**

This report specifically focuses on the Ivanhoe neighborhood, one of the Kansas City, Missouri’s oldest and largest neighborhoods. Research was conducted in partnership with the Ivanhoe Neighborhood Council (INC), a resident-led neighborhood association and Community Development Corporation. Since 2007, Greater Kansas City LISC has partnered with Ivanhoe by investing over $650,000 in the form of loans and grants to support neighborhood development and build capacity to steward its Quality of Life plans.

Ivanhoe residents identified the following Priority Health Issues that are explored in detail within the Ivanhoe Section of this report.

**Health Priority #1: Scaling Programs to Increase Impact**

**Recommendations:** A challenge experienced by many community-based organizations as they evolve is how to best expand their efforts to be more effective in the neighborhoods they serve. Consider a framework that includes four pathways for scaling up that are Quantitative, increasing the number of people or programs served; Functional, occurs when new programs are added to an organization; Political, which includes how an organization networks and mobilizes its community; and Organizational, which involves diversifying sources of funding, developing skills, and maintaining a level of participation and accountability within the community.
Health Priority #2: Constructing the Built Environment

**Recommendations:** Changing the built environment to make it easier to increase walkability can have a major impact upon public health. Key to this strategy will be figuring out how to pay for the high cost of restoring the infrastructure that makes up the built environment. Consider advocating for Health-in-All-Policies (HiAP) that ask public health, planning, and elected officials to restore neighborhoods that have been economically disadvantaged first. To introduce health equity into built environment decision-making, one strategy would be to frame the issue as a public health return-on-investment, where a better built environment in a neighborhood would see better health outcomes for its residents. The physical condition of homes also has an impact on individual health outcomes. Poor housing conditions tend to cluster together in neighborhoods, which compounds the risk for developing an adverse health condition. Consider Healthy Housing programs that include assessments of housing conditions conducted by housing and health professionals that produce joint action plans for each home to address home health hazards.

Health Priority #3: Establishing the Foundation for a Thriving Neighborhood

**Recommendations:** The success of a community in being resilient is an outcome of how successful it is in adapting to adversity. Improve the bonds between residents, INC, and the city through collective empowerment. Leverage the three aspects of community empowerment: Social Cohesion — the strong bonds that form between residents, their feelings of being connected, and their sense of community; Collective Efficacy — a resident’s individual belief that neighboring residents can work together towards a common goal; and Social Capital — the resources and trust present within a community and includes the quality of relationships and the links between organizations working together to invest in a neighborhood. Build on existing efforts in neighborhood planning and community gardening to continue to build stronger social bonds.

Moving Forward

This report was developed to help each neighborhood chart a way forward for improving health outcomes locally. It is worth noting that key decisions regarding what health issues should be included and prioritized came from neighborhood representatives responding to the feedback already received from previously completed neighborhood plans and resident surveys. While other community health issues exist, these issues are a focus for the neighborhood now.

This report is intended to serve as a reference for potential projects and programs that each neighborhood can choose to pursue. The expected value of this report is that it will make the supporting evidence more accessible so that as the neighborhood evolves, residents can pursue projects that best fit their needs and provides tools to residents working from the bottom-up with partners to affect change in the health of their neighborhoods. The challenge inherent in creating this report was making sure each neighborhood’s report accurately reflected the desires and aspirations of their community. More voices must be a part of the conversation on improving health outcomes in neighborhoods and it is hoped this report can provide value to them as well.

The individual projects and strategies are for each neighborhood to determine, but having supporting evidence can make collaboration between partners more sustainable. Funding sources promoting health in communities is increasing as evidence is building that an individual’s neighborhood has a large impact upon their health. It is for this reason that this report exists, to both demonstrate and propose possible ways that Kansas City communities can improve the health of their neighborhoods. Tackling issues in this report will be the focus of Greater Kansas City LISC and neighborhood organizations and leaders going forward.
SUMMARY

In the summer of 2017, Greater Kansas City Local Initiatives Support Corporation (LISC) contracted with Dotte Agency — a Wyandotte County community design initiative out of the University of Kansas, School of Architecture and Design — to provide research and technical assistance on how community development can have an impact upon public health outcomes. LISC wanted to gain a better understanding of how their investments over time ($188 million in the form of loans, grants and technical assistance since 1981) contribute to the health of a community and the individuals who live there.

Over the last decade, LISC had engaged with community leaders representing five neighborhoods across the Greater Kansas City Area as part of their NeighborhoodsNOW initiative: Blue Hills, Ivanhoe, Scarritt Renaissance in Kansas City, Missouri and Douglass-Sumner, and Downtown Kansas City, Kansas. LISC tasked Dotte Agency with developing a protocol for how the community could prioritize public health goals locally. This process was designed to include previous community engagement initiatives, including the most recent Quality of Life Plans (QLP) developed by LISC with community engagement, and the Neighborhood Pride Evaluation Surveys (NPE Surveys), developed by NeighborWorks America for LISC and conducted by partnering neighborhood organizations.

Spatial Mapping

Dotte Agency began by meeting with representatives from the partnering neighborhood organizations to identify where recently completed community development projects, potential community development projects, and perceived barriers to health access existed in the built environment. This was done by mapping neighborhood assets and opportunities, where residents were invited to identify areas of pride or concern on a map, and leave their comments in an open-ended format. Comments received were recorded and helped to indicate where community health priorities existed within the built environment. This process provided a geographic awareness that supplemented the pre-existing data collected by the QLP and NPE Surveys.

A parallel analysis of the collected NPE Survey data was developed by the KCMO Health Department. The goal of their report was to share what, if any, statistical significance existed between questions regarding ‘overall satisfaction’, ‘feelings of safety’, and ‘social capital’ among the residents that answered the surveys. This data gives LISC a deeper understanding of the engagement levels and resident satisfaction within the neighborhoods and how this may alter future approaches to connecting with them.
Community Engagement

Critical to the card sorting process was that all issues presented were sourced from previous community engagement efforts that had sought to represent the voice of each community at large; the participating neighborhood representatives were asked to build their categories based only upon what was on the table in front of them. An initial card sort typically resulted in six to eight community development categories that had a common theme, such as ‘Infrastructure’, or ‘Youth Engagement’.

After a group discussion, the remaining categories were narrowed down to three ‘priority issues’, with each issue related to public health outcomes affected by the built environment. The grouping of the individual cards into their initial categories was recorded to better inform which issues the categories were developed to address. The title of each category was co-determined by the neighborhood representatives, and they were instructed to use a verb or an action-word to preface the final three priority issues that they defined.

Photographs of community engagement and the card sorting workshop were taken by Dotte Agency throughout, to both document the process and to ensure accuracy in the categorization of the priority issues as they were sorted.

Card Sorting

The second round of community engagement conducted by Dotte Agency saw neighborhood representatives invited by the partnering neighborhood organizations to participate in ‘Card-Sorting Workshops’. The purpose of these workshops was to make the process of validating key public health issues a participatory exercise. To achieve this, Dotte Agency adapted a public health methodology known as card sorting — a user-centered design technique that helps to prioritize issues that emerge out of what has been heard.

In the card sorting exercise, attending neighborhood representatives were asked to categorize individual cards, each one printed with information that represented some aspect of either the QLP, NPE Surveys, or the comments from the spatial mapping exercise. Whenever possible, information that was included on the cards was written verbatim, or with minimal changes to the text as it appeared in its original format. The cards themselves were neither positive nor negative in tone, but were instead meant to spark conversations about the issue presented, and allow neighborhood representatives to rely upon their own local-knowledge throughout the categorization process.
Ivanhoe Neighborhood Representatives:
Karen Boyd
Naliah M’Biti
Margaret May
Neil Rudisill
Alan Young

LISC:
Ina Anderson

Dotte Agency:
Shannon Criss
Matt Kleinmann

ABOVE: Ivanhoe Neighborhood Representatives engage in a card-sorting exercise to organize neighborhood responses into three Priority Health Issues.

Priority Health Issues:
1. Scaling Programs to Increase Impact.

2. Constructing the Built Environment.

3. Establishing the Foundation for a Thriving Neighborhood.

See pages 33-35 for the full list of public health and community development issues that were card sorted.
“[There’s a] new home neighborhood association. Everything is getting better; a community garden, and a change in the community’s atmosphere.”

Ivanhoe Survey Response
On December 12th, 2017, members of the Ivanhoe Neighborhood Council (INC) came together at the Ivanhoe Neighborhood Center as neighborhood representatives for the Ivanhoe neighborhood. Together with LISC staff, Dotte Agency shared that the goal of the meeting was for the neighborhood representatives to examine feedback from resident surveys and previous planning efforts, and then work together to validate three priority issues regarding how community development could best support public health outcomes in Ivanhoe. Dotte Agency explained that it would be their role going forward in utilizing the neighborhood’s priority issues as the topics for which they would research peer-reviewed public health journals related to community development. This would then be shared in a report specific to Ivanhoe’s priority issues. That report is this document, and its purpose is to be both an accessible resource for neighborhood residents and organizations, as well as a guide for future collaboration between LISC and their partnering neighborhood organizations.

1 SCALING PROGRAMS TO INCREASE IMPACT

A challenge experienced by many community-based organizations as they evolve is how to best expand their efforts to be more effective in the neighborhoods they serve. While state and local governments play an important role in facilitating policies and programs that can have wider impact, local neighborhood organizations typically go through a learning process as they develop programs and attract the resources they need to address local issues. This process is known as scaling-up, and in the broadest sense it means reaching more people within the neighborhood. From the perspective of the neighborhood organization it could also include ways of learning from other successful programs, building a grassroots movement, or reforming local policies. Research on how non-profits scale-up compares the process to the experience of growing-up, where neighborhood organizations gradually take on more autonomy, self-reliance, and independence.

Considering the various ways that local non-governmental organizations experience scaling-up, a public health framework already exists that can help INC to chart their own growth as a neighborhood organization looking to improve public health in Ivanhoe. This framework includes four pathways for scaling-up that Ivanhoe can consider: Quantitative, which includes increasing the number of people or programs served; Functional, which occurs when new programs are added to an organization; Political, which includes how an organization networks and mobilizes its community; and Organizational, which involves diversifying sources of funding, developing skills, and maintaining a level of participation and accountability within the community. Within each of these four pathways to scaling-up, there exists individual strategies for growth that Ivanhoe’s neighborhood leadership could pursue.
Quantitative

To increase the number of residents served and engaged in their community, there are five methods for INC to consider: 1) Spread organically, usually around a charismatic leader; 2) Replication of a project, program, or method that was found to be successful elsewhere; 3) Nurture local staff by providing incentives for engagement; 4) Merge — in part or in full — with another neighborhood organization to share resources and responsibilities; and 5) Integrate with a local governmental structure, such as the city. INC has historically been successful in increasing its capacity by spreading organically, with strong leadership provided by charismatic residents such as Margaret May and Alan Young. While a new group of neighborhood leaders is prepared to carry on their efforts, there exist other alternatives for how to best grow Ivanhoe’s capacity quantitatively.

As previously mentioned, this may include identifying and replicating models of other successful neighborhood programs, pursuing funding that empowers their next generation of resident leaders to develop new community-engaged programs, merging in some way with a partnering organization to share resources, or contracting with the City of Kansas City, Missouri (KCMO) to directly support their efforts. As organizations grow, they tend to pass through each of these stages, so as INC looks to scale-up, they should consider how best to build upon their previous success of spreading organically and identify their preferred pathway for increasing their impact within Ivanhoe.

Based upon the issues identified by residents — which were later card-sorted by the Ivanhoe neighborhood representatives as being important to scaling-up and increasing their impact (Table 1) — there are a few scenarios for INC to consider. INC has already introduced new community-engagement programs through their Grown in Ivanhoe Farmers’ Market, which was launched in the summer of 2015 and is held each week when in season. Additional programming efforts designed to reach seniors and/or local youth could be promoted to neighborhood residents that attend the farmers’ market.

One way that INC could scale-up its public health impact is by partnering with food non-profits promoting grassroots change in the local food economy — such as the Kansas City Community Gardens, the Giving Grove, After the Harvest, or Fresh Food HQ — and together pursue grants that can promote local urban farming policies or food education initiatives within Ivanhoe. This would align with the need to increase potential funding sources, which was identified in the cardsorting workshop. An initiative such as this should be informed by the experiences of previous efforts from INC and other partners, which sought to create a “food hub” at 33rd and Woodland and was identified in Ivanhoe’s 2013 LISC Quality of Life Plan (QLP)³.

Functional

The second pathway for INC to scale-up their services is to look to either horizontal or vertical integration. Horizontal integration occurs when new programs are added adjacent to existing programs. Two examples for INC to consider could be increasing child care services for residents attending INC events and to incentivize neighborhood cleanups through a volunteer voucher program, where vouchers could be redeemed for food items at the Grown in Ivanhoe Farmers’ Markets (both “child care” and “yard cleanups” were identified as issues in the card-sorting workshop).

An example of vertical integration would be if INC were to develop programs that directly supported Grown in Ivanhoe both upstream and downstream. Vertical integration upstream could see INC acquiring vacant lots to develop urban farms and training youth and/or seniors interested in urban farming. Vertical integration downstream might see INC packaging locally grown food items to sell as part of a community supported agriculture business model.

In either direction, horizontal and vertical integration can help INC continue to build social cohesion by offering residents incentives to stay connected to their neighborhood. If based around an already successful program (for example, the Grown in Ivanhoe Farmers’ Market), adjacent programming could allow INC to be more efficient in engaging their community members. It could also help INC to launch complimentary programs that can improve health outcomes, such as community classes and events on nutrition and how a diet that includes fresh foods can help to prevent chronic diseases such as type-2 diabetes. This would align with what was identified in the card-sorting workshop, where “Ivanhoe Community Center Classes” was highlighted, and a quote from the resident surveys included one resident
sharing what they’d like to see more of: “[My] Family is being educated [to] garden and growing fruits and vegetables. [I’d like to see more:] healthy eating and classes for nutrition and for diabetes needs”).

Political

For a neighborhood organization to scale-up politically, it involves building up power among its residents to further the goals of their community locally. While INC regularly works in an environment that is governed by KCMO policies, there are a few options to scale-up their capacity to advocate for change in those policies. One option is to empower residents directly through mobilizing. This can be done by inviting residents to participate in the decision-making process and help to set a policy agenda with INC. This would also include informing residents on how best to communicate with their elected officials.

One method for inviting residents to share in decision-making is participatory budgeting, which is based upon the simple idea that “ordinary citizens” should have a direct say in the public budgets that have an impact upon their lives. For Ivanhoe, this process could include giving residents “choice points” (either printed on paper or provided as tokens) that reflect INC’s available resources, which they can then deposit in folders or containers that represent their priorities. Using this method would allow residents to directly vote on which issues they’d like to see INC pursue, which allows for a greater sense of ownership in the success of the neighborhood and supports INC by helping to mobilize the community and providing greater transparency to the residents they serve. Using a similar process, the Ivanhoe Neighborhood Association meetings could also allow residents to vote for policies and initiatives that the neighborhood should advocate their local elected officials on.

A different form of scaling-up politically would be to network, which would see Ivanhoe work together with similar neighborhoods to form coalitions on key public health issues. These neighborhood coalitions occur as either ad hoc networks (less structured and at the same level, such as INC working with other neighboring community development corporations) or through vertical aggregation networks (which would see official representatives from Ivanhoe join representatives from other outside partners, funders, and local government agencies to advocate for policy changes).
A third option exists to engage politically and that is direct entry, or running for elected office. Presently, Ivanhoe is represented at the city level by District 3 Commissioner Jermaine Reed and At-Large Commissioner Quinton Lucas. At the state-level, Ivanhoe is represented by two Missouri State Representatives: Barbara Anne Washington’s State House District 23 includes northern Ivanhoe, and Brandon Ellington’s State House District 22 includes southern Ivanhoe. Ivanhoe’s representative in the Missouri State Senate is Kiki Curls. As running for office is done on an individual basis, it can involve a charismatic leader from within the neighborhood organization running for election by reflecting their neighborhood organization’s work and values.

Organizational

The goal of organizational scaling-up is so that when a neighborhood organization grows, its programs remain sustainable and not completely dependent upon non-renewable resources. This requires having management procedures in place in the event of an unanticipated setback, such as the loss of a grant or key staff members. Like the previous pathways for scaling-up, having greater organizational capacity is a viable pathway to pursue, but it also can occur naturally as other pathways are pursued, with each step increasing the capacity of the organization. For example, if INC looks to scale-up functionally by adding additional programs adjacent to existing ones, the way they go about developing it will by nature also increase their organizational capacity.

A key measure of an organization’s stability is the diversity of its funding sources, so that it does not overly rely on a few contracts, grants, or donations. This can be offset by increasing self-financing opportunities, which might involve creating fee-for-service activities in the neighborhood. These could be paid for either by residents, or — if associated with healthy living — could see healthcare resources pay for each resident served, provided that the activities are linked to better health outcomes. A third way to diversify funding is to capitalize on the collective experience that the neighborhood has in taking on adaptive work in their neighborhood. This could see residents associated with INC contract with community development organizations or other local non-profits to provide their expertise as consultants on projects that engage residents. The underlying difficulty in all of these strategies is balancing profit and marketing with the need to better serve the Ivanhoe community directly.

Regardless of how an organization chooses to scale-up, it’s considered critical that they maintain participation and accountability with the residents they serve. A alternative to this could be that the goal of a neighborhood organization may not be to “scale-up”, but instead to “scale-down”, working to make the tools and resources required for organizational growth more readily accessible to all residents within the neighborhood.

2 CONSTRUCTING THE BUILT ENVIRONMENT

Changing the built environment to make it easier to walk in takes considerable time and money, but doing so can also have a major impact upon public health. For example, one study found that “people living in better connected, more compact, mixed-use neighborhoods are more likely to be active enough to achieve health benefits” 5. When neighborhoods were objectively measured for how walkable they were, the neighborhoods scored as the least walkable saw only 18% of their residents walk 30 minutes or more each day, while the most walkable neighborhoods saw 37.5% of their residents walk 30 minutes or more daily. The conclusions that were drawn is that city planners, engineers, and transportation professionals must work together with public health officials to
repair the infrastructure of cities and make permanent improvements in neighborhoods to improve public health outcomes.

Getting these different disciplines to work collaboratively towards improving health equity in local government, however, is another matter. One of the biggest hurdles that cities face is how to pay for the high cost of restoring the infrastructure that makes up the built environment (which includes “more lighting”, “streetscape improvements”, “new parks”, and improving vacant lots – all of which were identified in the Ivanhoe card-sorting workshop). Together, these elements of the built environment collectively shape public perceptions on the walkability of a neighborhood, or the lack thereof.

Healthy Housing Program

As part of the Robert Wood Johnson Foundation Commission to Build a Healthier America, researchers considered the impact that homes play on individual health outcomes. After reviewing the evidence, they found that poor housing conditions tend to cluster together in neighborhoods, which compounds the risk for developing an adverse health condition. Much of that exposure comes from low-income housing being developed in areas less protected by zoning regulations, and therefore more likely to have lead contamination in the soil and air pollution near schools. Approximately 40% of all childhood asthma diagnoses are linked to children being exposed to indoor allergens (for example, dust mites and mold).

The cost of housing and utilities can also present additional health burdens, where roughly 40 million Americans reported spending more than 30% of their income on housing expenses in 2007. The financial strain of providing for housing and utility costs has been linked to the delay in low-income individuals seeking preventative health care, as well as a higher rate of emergency department utilization. This financial tradeoff between housing costs and health can put individuals at an even greater risk of emotional stress, which can lead to worse health outcomes. With limited options available for affordable housing, the relocation of families due to housing costs can also negatively impact the social networks that families rely upon, including their schools, healthcare providers, and neighborhood relationships.

Despite there being relatively little available research on the effects that housing renovation programs can have on public health, a New Zealand study that included almost 10,000 residents in over 3,000 homes provides compelling evidence. The intervention of improving housing conditions came as a response to an outbreak of meningitis, where one of the policies introduced included improving housing stock as a way of addressing the epidemic. The goals of the program were to: 1) Improve resident access to healthcare services; 2) Design better homes, build extensions to houses, or create healthier indoor environments; and 3) Provide links to social service agencies for residents.

The study researched the Healthy Housing Program, which first identified a geographic area, and then conducted assessments that were carried out by an expert in housing conditions and a public health nurse. The assessments resulted in a joint action plan for each home, where meeting each family’s needs were the primary concern. This included education on health risks within the home, referrals to local health providers, the installation of insulation to make the home warmer and dryer, modifying the home to meet the needs of individuals with disabilities, transferring people from homes that were not adequate, and increasing the number of bedrooms in a home when necessary. The study tracked its success rate by measuring outcomes for self-rated health, self-esteem, the use of primary care, and reductions in the need for secondary care.

The hypothesis of the Healthy Housing Program study was that damp, cold, and overcrowded housing conditions promote the spread of infectious and respiratory diseases. The data collected found that, over the seven years of pre- and post- interventions, the rate of hospitalization for 0-4 year-olds was reduced by 11%, and for 5-34 year-olds it was reduced by 23%. The conclusion by the researchers was that a combination of improving housing conditions and increased access to...
social services can reduce rates of acute hospitalization in low-income residents. While this study is unique to New Zealand, it nonetheless represents one of the only clinical studies conducted on the linkage between housing conditions and health at this scale. What was not a focus of the study, but was noted by the researchers, is that the improvements to housing conditions were accompanied by improvements to self-reported self-esteem, suggesting that improvements of housing can also lead to increased social cohesion among residents.

In Missouri, the Low-Income Weatherization Assistance Program (LIWAP) was established in the 1970s to provide “cost-effective energy-efficient home improvements to Missouri’s low income households, especially the elderly, children, those with physical disadvantages, and others hit hardest by high utility costs”. In Jackson County, the Community Action Agency of Greater Kansas City (CAAGKC) services programs through federal funding that can help Ivanhoe residents improve their housing conditions, including utility assistance, home weatherization, and healthy home assessments. To apply, residents must fill out an application (attached in the appendix) and include additional information such as social security information, recent electric and gas bills, and either proof of ownership of the home or authorization from the landlord. Applicants must also be within 200% of the Federal Poverty Guidelines, which is an annual income of $24,280 or less for an individual, and $50,200 or less for a family of four.

Another resource for Ivanhoe to consider connecting with is the Metropolitan Energy Center (www.metroenergy.org). They can provide do-it-yourself training options and a list of rebates and incentives available through local utilities to neighborhood associations and community groups. They also have a list of certified home energy auditors and contractors to assist homeowners in making repairs. A unique feature of the Metropolitan Energy Center is their Project Living Proof. Project Living Proof provides access to resources and examples for how local homeowners can make healthy home repair improvements. It is also conveniently located at 3808 Paseo, only a half mile southwest of the Ivanhoe Neighborhood Council. A example of a program that could be developed by INC would be to connect residents interested in weatherizing their own homes to resources from the Metropolitan Energy Center, as well as a sign up for guided tours of Project Living Proof, at the weekly Ivanhoe Farmers’ Markets.

Another available resources is the national non-profit organization Green & Healthy Homes Initiative (GHHI). They provide free technical assistance resources on their website (www.greenandhealthyhomes.org), including assessment tools available for conducting healthy home inspections. GHHI defines a healthy home as one that is dry, clean, pest-free, safe, contaminant-free, well ventilated, well maintained, and thermally controlled.

In December 2017, GHHI put out a request for proposals application for communities interested in receiving pro bono technical assistance in creating their own healthy home visiting programs designed to reduce asthma rates through Medicaid and hospital reimbursements. As part of the application, GHHI expects that applicants have two partner entities participate, including a health care entity and a service provider partner that can support. In Ivanhoe, INC could partner with Swope Health Services and the Metropolitan Energy Center to develop a healthy homes inspection program that could perform healthy home inspections and refer homeowners and renters to a health reimbursement system that would cover the costs of home weatherization services.

**Health-In-All-Policies**

With an awareness that resources are limited, and that decision-making power can still direct what limited funding is available to projects that increase inequality in neighborhoods, a recent public health movement towards Health-in-All-Policies (HiAP) asks public health, planning, and elected officials to restore neighborhoods that have been economically disadvantaged first. This shift considers the Social Determinants of Health Framework — which presents how health is impacted by education, income, race, ethnicity, neighborhoods, and access to health — to promote health equity in all policies. A HiAP framework asks governmental departments and agencies to work together across sectors to systematically address health in policymaking by targeting the determinants of health rather than providing health services alone.8

One example where HiAP has been implemented is in Minnesota, where Dr. Ed Ehlinger, the Commissioner of the Minnesota Department of Health (MDH), made health equity a priority. This included having staff recognize that structural racism presents barriers that can prevent all people from having equal access to good health, and that the role of government should be to reduce
ABOVE: Built Environment improvements can be seen in Ivanhoe, including the Jim Nutter Park, constructed 2010.

BELOW: The Nutter Ivanhoe Neighborhood Center is an important space for community events and meetings, as well as anchoring nearby community gardens, parks, and vacant lot restoration projects.
those barriers and therefore improve public health.
This way of thinking extends out to other policies in the
built environment, including policies for more equitable
transportation, housing, and labor. This approach saw
the MDH “engage in public discussions about minimum
wage (connecting income and health), multi-modal
transportation systems (connecting transportation and
health), and paid family leave (connecting nurturing
family environments and health)” 9. While a HiAP
framework alone may not immediately address issues
in the built environment, it can bring about a cultural
transformation within city departments, and better guide
decision-makers to champion policies that reduce health
disparities.

Additional cities across the country have also begun
to adopt a HiAP framework. Los Angeles created a
Healthy Design Workgroup in 2012 (which included
representatives from their Public Works, Regional
Planning, Parks and Recreation, Arts Commission, and
Health Department) to develop bike lines, improve
streetscapes, introduce crosswalks, and promote gardens
and farmers’ markets. San Francisco created their
Program on Health, Equity, and Sustainability in 2002
to improve air quality in homes near busy roads and
reduce pedestrian injuries. Nashville adopted a health-
based scoring system to guide which transportation
projects were selected to be funded, which saw bicycle
and pedestrian projects see an increase from 2% in
their previous plan to 70% after the HiAP approach was
introduced 10.

GO Bonds
To address the issue of inadequate funding for repairs in
KCMO, on April 4, 2017, voters approved the issuance
of $600 million in bonds to repair streets, bridges, and
sidewalks, which is to be released annually in roughly $40
million increments 11. This amount includes a dedicated
$150 million for sidewalk repairs.

To determine where to spend that money, KCMO
sidewalks were assessed in 2017. Most of Ivanhoe was
determined to be either “Priority 2, 3, or 4”, where
“Priority 1” areas will be given the most urgency in
sidewalk repairs and “Priority 5” the least urgency (Figure
1). “Priority 1” areas for sidewalk repair only appear in
Ivanhoe at the far corners of the neighborhood 12. The
priority assessment was based upon a data-driven scoring
system that gave priority to sidewalks near amenities
such as schools and libraries, access to transit stops and
grocery stores, and major streets with high population
density in the surrounding areas 13.

An unexpected consequence of this system may be that
areas that have seen historic disinvestment (for example,
a lack of retail development such as shopping centers,
grocery stores, pharmacies, or restaurants — all issues
identified in the Ivanhoe card-sorting workshop) will by
default score lower on the point system being used, and
therefore receive repairs later in the process. According
to KCMO, citizens are still encouraged to report built
environment repair needs by calling 311, though these reports may not generate an immediate inspection or repair.

Where a health equity approach might play out in Ivanhoe can be found in how KCMO utilizes their data to prioritize what areas need streetscape repairs over others. For example, the Sidewalk Demand Analysis tool used by the city to prioritize sidewalk repairs could see a change in the values it assigns to systemically disinvested neighborhoods. By introducing a health equity lens, analysis tools used by KCMO could instead prioritize built environment investments in areas where residents are older, less likely to own a car, or less likely to own a home, which could make their access to health more dependent upon the quality of the built environment around them. By ensuring that built environment policies work to reduce barriers to health, GO Bond funding could later extend to developing transportation projects that improve access (including better access to Highway 71, a bike corridor on either 35th, 36th, or 40th Streets, and a new bus line on 39th Street — all issues identified in the Ivanhoe card-sorting workshop).

As it currently stands, the KCMO analysis tool being used prioritizes GO Bond reinvestment for streetscape improvements in areas like Downtown KCMO (areas that are considered as “Priority 1 and 2” for repairs, largely due to how the scoring system ranks access to transit, major streets, and vehicles higher than neighborhoods that are less accessible). A HiAP approach that governed data-driven tools like the KCMO Sidewalk Demand Analysis could instead incorporate data on health equity, where neighborhoods with higher crime rates could be prioritized for projects that increased public lighting (issues involving crime and a lack of public lighting were brought up in the Ivanhoe card-sorting workshop).

To introduce health equity into built environment decision-making, one strategy would be to frame the issue as a public health return-on-investment, where a better built environment in a neighborhood would see better health outcomes for its residents. A public health study that looked at transportation in Dane County, Wisconsin, found that the health benefits of having new sidewalks installed, and with more retail places to walk to, saw an increase of physical activity and a decrease in air pollution. The results of the study showed that when you divide the total cost of construction by the benefits of improved health, there was a benefit-to-cost ratio of 1.87, indicating that there is a positive return on investment for public health when cities invest in more walkable neighborhoods. Based upon research like this and an analysis on the cost of construction versus potential health benefits, KCMO neighborhood organizations could argue that to improve health equity, GO Bond investments should be first made in neighborhoods that have higher health disparities rather than ones that already have adequate levels of access to health.

To best advocate for a HiAP approach within KCMO departments, it may require that INC look to mobilize its residents, its elected officials, and/or a coalition of similar neighborhoods to request that KCMO change how built environment repairs and investments are prioritized. It will also likely involve having a champion within KCMO to bring the various departments needed together to form a HiAP approach. This aspect of mobilizing the community to take on more decision-making power builds upon the first key priority issue identified by the Ivanhoe neighborhood representatives: Scaling Programs to Increase Impact. By scaling-up their political power within the community, INC and its partners can have a greater impact in how KCMO distributes funding that is already earmarked for restoring the built environment.

3 ESTABLISHING THE FOUNDATION FOR A THRIVING NEIGHBORHOOD

The third priority issue that was determined by the Ivanhoe neighborhood representatives identified a different set of issues from the previous two. The underlying issues that were card-sorted to discuss establishing the foundation for a thriving neighborhood were less related to any Quality of Life Plan or specific to any one area within Ivanhoe, but instead was made up almost entirely from responses and quotes pulled from the NPE Surveys (Table 1). Most of the quotes referenced how neighborhood leaders had improved the neighborhood while new neighbors and community gardens were contributing to a more positive neighborhood atmosphere. The overall responses to questions regarding how connected and supported individuals felt about their neighborhood also indicated a higher level of satisfaction within Ivanhoe compared to other LISC neighborhoods surveyed by NeighborWorks America. Collectively, these underlying issues point to a level of resilience within the Ivanhoe neighborhood, and understanding how best to build upon that resilience can provide new opportunities to thrive.
It is first important to understand what “resilience” and “thriving” can mean in the context of a neighborhood. From the field of social psychology, whenever a negative event occurs, there are four potential responses to that trauma. The first is to succumb, or give in. This may happen when a neighborhood is divided by a highway and ceases to exist, or a critical community organization closes with nothing to fill the void left behind. The second response is survival with impairment, which for many neighborhoods describes how they’ve coped with increasing neighborhood blight leading to ever-decreasing neighborhood reinvestments. The third response is resilience, which describes the capacity of the neighborhood to withstand the trauma and return to normal activities. For neighborhoods in cities that are damaged by natural disasters, resiliency often becomes the stated goal. The fourth and final response is thriving. Unlike the previous three responses, a neighborhood that can thrive comes back better than before after a traumatic event. This may be due to a shift of power, or an expressed desire to leverage the adversity into an opportunity to address systemic disinvestment. There are a few aspects that INC should consider investing in to build a foundation of thriving within Ivanhoe.

When faced with adversity, research has shown that some individuals can possess innate characteristics of personal hardness or coping mechanisms to resist their disease and improve their own health. Likewise, a neighborhood that has experienced a traumatic event can see residents and neighborhood organizations emerge with newly developed skills. Within resilient communities, support is provided to residents by not only increasing the number of social connections available, but also addressing related problems by helping them to increase their capacity. This increase in capacity allows residents to be more thoughtful in their planning and taking a forward-leaning approach towards achieving attainable goals, with a realistic vision for their community as a whole.

The success of a community in being resilient is an outcome of how successful it is in adapting to adversity. How an individual adapts to adversity is defined by a few key variables: their ability to cope, having flexibility in their lives, having a sense of purpose and emotional engagement in their community, and having personal agency. For an individual, personal agency is defined by making decisions, acting intentionally, developing plans, and setting goals to pursue those plans. With resiliency and thriving in mind, Ivanhoe’s capacity to adapt to traumatic events will be directly tied to their being flexible, engaging with residents, and making decisions together about the future of their neighborhood.

Community Empowerment

A popular theory for understanding how crime presents itself in neighborhoods is known as the broken windows theory, or the idea that a neighborhood full of broken windows demonstrates a lack of social control (security and safety in the neighborhood), which in turn invites crime to occur more frequently. This theory has been expanded to realize that perceptions of low social control in the built environment may be as important as objective measurements. However, research has noted that perceptions of crime are less linked to actual crime rates than they are to a lack of trust, social activity, and relationships within a neighborhood. Therefore, as a resident’s perception of safety in their neighborhood reflects their own social bonds (how well they know their neighbors), increasing the quality of those social bonds — as well as individual perceptions of social control and personal investment in their neighborhood — can then increase resident perceptions of safety.

In terms of public health this is a critical point to make, because perceptions of crime are directly related to stress, especially within low-income, older, and predominantly African-American neighborhoods. Excessive stress has been linked to poor health outcomes, including poor heart health, decreased immune functions, and decreased quality of sleep. Chronic stress has also been shown to be a cause for many mental health issues, including depression, anxiety, and substance abuse. For these reasons, relieving stress by increasing perceptions of safety — and therefore improving social bonds — within a neighborhood should be considered as essential for a neighborhood looking to thrive in the face of adversity.

How Ivanhoe can go about improving the bonds between its residents, INC, and the city is known as collective empowerment. To address how communities are empowered, the field of research on this topic tends to use terms such as social cohesion, collective efficacy, and social capital. For the sake of clarity, they are briefly outlined below:

Social Cohesion: This refers to the strong bonds that form between residents, their feelings of being
ABOVE: Ivanhoe residents attend a neighborhood association meeting at the Nutter Ivanhoe Neighborhood Center.

LEFT & BELOW: The Nutter Ivanhoe Neighborhood Center shares community artwork on its walls.
How would you rate each of the following aspects of the NEIGHBORHOOD?

The percent below reflects residents that answered either “Good” or “Very Good” for each neighborhood aspect:

<table>
<thead>
<tr>
<th>Aspect</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cleanliness</td>
<td>42%</td>
</tr>
<tr>
<td>Condition of houses</td>
<td>29%</td>
</tr>
<tr>
<td>Safety</td>
<td>55%</td>
</tr>
<tr>
<td>Friendliness</td>
<td>78%</td>
</tr>
<tr>
<td>Streets, sidewalks, and public spaces</td>
<td>36%</td>
</tr>
</tbody>
</table>

Overall, how SATISFIED would you say you are living in this community?

1. Very satisfied (25%)
2. Satisfied (40%)
3. Somewhat satisfied (22%)
4. Somewhat dissatisfied (7%)
5. Dissatisfied (2%)
6. Very dissatisfied (4%)

connected, and their sense of community. It can be enhanced by organizations such as INC bringing people together to pursue a common goal. When it is present, it can help to decrease conflicts within a neighborhood.

**Collective Efficacy:** This relates to a resident’s individual belief that neighboring residents can work together towards a common goal. It is evident by a resident’s willingness to participate in things like neighborhood cleanups or community gardening projects. Community organizing and political action are also related to collective efficacy.

**Social Capital:** This represents the resources and trust present within a community and includes the quality of relationships and the links between organizations working together to invest in a neighborhood. It is both an outcome and a predictor for solidarity among residents in a neighborhood. It is typically generated by social organizations rather than by individuals alone, however, residents can rely upon it to help make change in a neighborhood (for example, organizing a community event or cleaning up a neighborhood park).

By leveraging these three aspects of community empowerment, different models exist that have been shown to empower residents within neighborhoods and build stronger social bonds. Youth Violence Prevention and Community Policing programs include strategies to increase social cohesion and strengthen bonds between residents and improve perceptions of safety within a neighborhood. “Clean and Green” programs can involve residents working with neighborhood organizations to assume ownership of vacant land and commit to maintaining it, often through community gardens or mini parks, such as the Lots of Love project previously developed by Ivanhoe. Youth Mentoring, either through “Father and Son” programs or Youth Empowerment, can strengthen relationships between adolescents and their community. This can include youth committing to volunteer alongside adults to directly engage in neighborhood projects. More models like these exist to empower residents, but each can increase the social cohesion, collective efficacy, and social capital within Ivanhoe, and as a result reduce stress and improve health outcomes.
Neighborhood Planning

For neighborhoods looking to foster personal agency in their communities, case studies exist that demonstrate how neighborhoods can be empowered through inclusive planning processes. An example of how that could occur comes from a neighborhood planning process out of Seattle. In 1994, Seattle’s city council — because of a perception that neighborhoods would obstruct the planning process — decided not to invite neighborhood participation when they began to develop their comprehensive plan. This resulted in an outcry among residents, which resulted in the formation of a Neighborhood Planning Program with the intent of “enabling the City and the community to work in partnership.” Research on the outcome of this process resulted in five keys for successful collaborative neighborhood planning.

The director of the Seattle Neighborhood Planning Office (NPO), Karma Ruder, believed that no plans for equity, developed by professionals, or validated by large neighborhood meetings could ever substitute for the ongoing process of building trust through personal relationships in the neighborhood. To address this, the NPO hired staff that believed in the innate wisdom of the community and would trust it. The first six months of their program involved training the NPO staff and the neighborhood groups themselves, so that they would both be equipped with the tools needed to build trust within neighborhoods.

From the outset, neighborhoods were given the choice on whether to participate or defer planning of their neighborhood to the comprehensive plan; all 37 neighborhoods included in the plan chose to participate. Each participant neighborhood was eligible for a $10,000 grant, that required that they show a stakeholder analysis and how they planned to engage residents. As each neighborhood’s planning process began to take shape, the city provided financial, data, programmatic, and process tools to the neighborhood planning groups. These tools included GIS Mapping software with demographic, land use, transportation, and environmental data, as well as maps and aerial photographs to include in public presentations. City departments engaged in housing, police, transportation, and utilities each provided citizen toolkits to help residents understand what options they had with existing programs offered by the city. These toolkits included guidebooks on how to support outreach efforts, as well as land-use maps, historic preservation information, best practices on block-watch programs, how to develop partnerships with public schools, and how to improve access to pedestrian facilities.

A lasting benefit of this neighborhood planning process was the cultural shift within the city, where some city departments decentralized to better collaborate with neighborhood development managers (which included NPO staff and citizen-led stewardship groups). This shift in culture was based upon valuing democratic deliberation, accountability, and community development while focusing on a neighborhood’s existing assets.

To achieve this shift in KCMO, the first step recommended by the Seattle case study was that civic actors (such as INC or resident leaders) demand a more inclusive planning process. This arrives at the second recommendation, which was that elected officials ensure that city departmental staff work collaboratively with neighborhoods on an everyday basis. The third recommendation was that cities adequately fund a neighborhood planning office, so that staff can continue to build trust between the residents and the city. The fourth recommendation was that citizen planners continue to be empowered with dynamic and accessible tools for mapping, visualizing, and planning their neighborhoods. The final recommendation was that participatory planning processes not be a substitute for democratic politics, but supplement that process by equipping residents with the tools to hold their elected officials accountable to neighborhoods that they serve.

Community Gardening

While gardening has been recognized to promote better health at an individual level (through regular exercise and a healthier diet), the communal aspects of gardening are also becoming increasingly recognized for their role in improving the social health benefits within neighborhoods. One way this is measured is through neighborhood attachment, which seeks to determine the perceptions an individual has about their surrounding built environment. Rates of attachment to one’s neighborhood can be either good or bad: too low, and someone may want to move; too high, and they may oppose changes that could otherwise benefit the neighborhood. One study looked to explore the role that community gardens played in attachment to place, and if
that improved the rate of social interactions that support overall public health outcomes.\textsuperscript{24}

The study focused on neighborhoods in Denver and included survey responses from 410 residents, which included 41 community gardeners. The survey questions considered whether an individual gardened or not, their home ownership status, and socioeconomic factors such as race/ethnicity. The results of the study indicated that the longer residents lived in the neighborhood, the more attached they were to it. They also saw that there was a significant association between those that gardened and those that felt attached to their neighborhood. These results speak to the benefits of incorporating gardening into programs that promote neighborhoods: “garden participation requires active engagement and supports formal and informal social interactions with family, friends and neighbors.”\textsuperscript{25}

Another study in the same area interviewed resident gardeners, and spoke to the social health benefits of how neighborhood communication and participation can be enhanced through the process of gardening:\textsuperscript{26}

“\textit{It’s a way of bringing people together. It’s a place where we can be in a way that we aren’t in the world. We are better for being outdoors in a community, we’re better for being together in a community as opposed to holed up in our own places. This is an urban environment where we are here. We’re not in a walled city, you know...}”

“There’s ways to work things out without having a major problem where you come together with an idea that’s agreeable to everyone, everyone gives and no one’s feeling like they’re not listened to...”

“And so, we just enjoy each other’s company, interacting, trying to reach consensus, and I think the fact that we have such good communication with our gardeners, and let them know what the expectations are, the rules, clean up, then there’s no surprises.”

These interactions speak to the potential for community gardening efforts to increase the collective efficacy of the neighborhood. While INC is already engaged in community gardening and urban farming, one possibility they may have for diversifying their funding resources is to introduce programs that measure and evaluate the impact that local community gardens are having, and provide feedback to KCMO on how best to introduce more equitable land-use policies to see increased public health outcomes.
References

2. Same as above
14. 311 Sidewalk Repair Requests http://kcmo.gov/publicworks/sidewalks/
25. Same as above
Figures

Figure 1:

The KCMO Sidewalk Demand Analysis mapping tool indicates what sidewalk repair priorities are for the Ivanhoe area.

It uses a point system prioritizes future sidewalk repairs, taking into account proximity to existing development and transportation amenities.

View the map at: http://kcmo.gov/publicworks/sidewalks/
Card Sorting: Priority Issue #1

SCALING PROGRAMS TO INCREASE IMPACT

 Resident quotes from the survey:

“Family is being educated of garden and growing fruit and vegetables. Healthy eating and classes for nutrition and for diabetes needs.”

Issues identified in previous Quality of Life Plans:

Senior Programming
Grown in Ivanhoe Farmers’ Market
Farmers Workshops
Local Entrepreneurship
Youth Programming
Hope, Heritage, and History
Richardson Elementary
Yard Cleanups
Ivanhoe Community Center Classes
Card Sorting: Priority Issue #2

CONSTRUCTING THE BUILT ENVIRONMENT

Resident quotes from the survey:

“Everything is right here- why live in suburb? Transportation available if roads are bad.”

“It is bad around here, won’t clean fence, shootings, drugs, etc.”

“Murders across street, shootings while driving, robberies”

“It’s a nice neighborhood but there’s just too much crime and no stores. We need less boarded up houses”

“We have more rental properties and I think that makes a difference. Older folks are dying.”

Survey responses to the following questions:

How safe would you say you feel in each of the following places?

Issues identified in previous Quality of Life Plans:

Minor Home Repair Program
Affordable Housing
More lighting
Ivanhoe Gateway at 39th Project
Access to the highway
New movie theater
More sit-down restaurants
Bike corridor (35th, 36th, 40th St.)
Lots of Love
Streetscape Improvements
Bus line service (possibly on 39th)
New Dry Cleaners
New Grocery Store
New Parks
Linwood Shopping Center
Access to pharmacies
Card Sorting: Priority Issue #3

ESTABLISHING THE FOUNDATION FOR A THRIVING NEIGHBORHOOD

*Resident quotes from the survey:*

“Changed a lot since I was a kid. Everything looks nice”

“Change in neighbors who have left and came in, more people wanting to improve and more communication.”

“New home neighborhood association. Everything is getting better, community garden change in community’s atmosphere”

“Neighborhood has been through a lot and Mrs. May has improved it a lot.”

“Could be improved if people higher up make it happen.”

*Survey responses to the following questions:*

How long have you lived in this neighborhood?

Overall, how satisfied would you say you are living in this community?

How would you rate each of the following aspects of this neighborhood?

How likely would you say it is that people in your community would help out if the following occurred?

How likely are you to recommend this community to someone else as a good place to live?

If you had the choice, would you continue to live in this neighborhood?

Right now, how willing are you to become involved in your neighborhood by working with others to make things happen?

How much of a positive difference do you feel that you, yourself, can make in your community?

How connected would you say you feel in this neighborhood?

Compared to three years ago, how would you say your community has changed overall?

Thinking about the next three years, how would you say your community is likely to change?

*Issues identified in previous Quality of Life Plans:*

Long-term Sustainability

INC Brand

Organizational & Staff Programmatic Capacity

New Board member(s)

Identify funding sources
INTRODUCTION

Dotte Agency and representative leaders and residents have developed ‘sample readings’ of the Ivanhoe neighborhood in an area selected by neighborhood of leaders. Measures to better understand the salient features that may enhance outdoor physical attributes of building and land property, active living, such as walking and bicycling for transport or leisure; and identify cues of safety within the neighborhood. The purpose of this primary neighborhood audit was to identify key factors that contribute or detract from a healthy built environment.

This customized “Healthy Community Audit Instrument” has been created to build upon the information from discussions and surveys in the past year through Neighborworks Survey and Community Engagement activities. There are two key standard, well-recognized surveying instruments that have been utilized in this project: the Active Living Research “PIN3 Neighborhood Audit” tool and the Crime Prevention Through Environmental Design toolkit: A Guide for Planning and Designing Safer Streets. See the following pages for the shorter, customized version that we developed for the Ivanhoe neighborhood and see the appendix for the two longer, published versions of the PIN3 and CPTED tools.

Through the Community Engagement process, neighborhood representatives and residents have collectively identified a 10-block area between I-71 and Prospect Avenue and 37th to 39th Streets. Dotte Agency, LISC and a neighborhood leader/resident met on 6 March 2018 to survey this area. In discussing the area, the leaders and residents identified recent momentum in place: 1.) the Ivanhoe Gardens Apartments (between 37th and 38th Streets/I-71 and Garfield Avenue) were built and occupied; 2.) the housing development (between I-71 and Garfield Avenue/38th and 39th Streets was recently developed and occupied; 3.) the Aldi Grocery Store (between Wabash and Prospect Avenues/38th and 39th Streets) and 4.) the church (between Wabash and Prospect Avenues/37th and 38th Streets) is currently re-landscaping the area surrounding it and building a large parking lot. These signs of momentum of public and private investments make healthy changes to the built environment visible—both on private property development and improvements to the publicly shared spaces.

Moving Forward

The neighborhood audit method is best done with a group of leaders, residents and those that have capacity to bring investment and policy changes to the neighborhood. To make small and large changes, it is important to visit and revisit the area and build others’ interest in being aware of the neighborhood needs. The Ivanhoe leadership, LISC partners and city planning and public works representatives should be part of the
neighborhood audit process. Also, by involving those that live within the 10-block area, finding block-by-block leadership is best, communication is improved to understand the underlying needs of the residents. The neighborhood audit process provides an objective analysis of visible signs of change in the neighborhoods. It is best if the neighborhood audits can be done repeatedly: a couple times a year when the seasons show different levels of resident activity and landscaping features (for example, a winter reading and summer reading) and annually to highlight small and large impact changes that have occurred since the last survey.

Characterizing Neighborhood Property in Health Research

Over the last couple of decades, studies have been developed to explore the impact of community characteristics on the physical and mental health of residents to better understand population health and health disparities. Direct observation of neighborhood characteristics using an audit instrument relies on more objective measurement to capture many of the comprehensive and detailed environmental characteristics relevant for health.

Purpose and Scope

The purpose of this primary neighborhood audit was to identify key factors that contribute or detract from a healthy built environment. This customized Healthy Community Audit Instrument has been created to build upon the data collected in the past year through the Neighborhood Pride Evaluation surveys and Community Engagement activities.

A copy of the Healthy Community Audit Instrument can be found in Appendix C.
Supported by the Grown In Ivanhoe Farmers’ Market, community gardens and urban farms have taken root in Ivanhoe.

Sidewalk conditions vary widely between dilapidated and new.

Single-family and multi-family residences in Ivanhoe incorporate front porches, which can have an impact upon perceptions of safety through neighborhood surveillance.
Identifying Safety Characteristics in the Built Environment

This neighborhood audit tool assess crime prevention through environmental design (CPTED), which is a multi-disciplinary approach to deterring criminal behavior through environmental design and relies upon the ability to influence offender decisions that precede criminal acts. Altering the physical design of neighborhoods in which humans reside and congregate in order to deter criminal activity is the main goal of CPTED principles. These principles of design affect elements of the built environment ranging from the small-scale (such as the strategic use of shrubbery and other vegetation) to the overarching build form of an entire urban neighborhood and the amount of opportunity for “eyes on the street.”

We analyzed the survey results through “Health Community Audit Instrument” and arrived at a four-point scale system:

<table>
<thead>
<tr>
<th>Street Name</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Garfield, 38-39th</td>
<td>4</td>
</tr>
<tr>
<td>Brooklyn, 38-39th</td>
<td>3.8</td>
</tr>
<tr>
<td>East 38th Terrace (off of Brooklyn)</td>
<td>3.2</td>
</tr>
<tr>
<td>Park, 38-39th</td>
<td>3.7</td>
</tr>
<tr>
<td>Olive, 38-39th</td>
<td>3.4</td>
</tr>
<tr>
<td>Wabash, 38-39th</td>
<td>3.6</td>
</tr>
<tr>
<td>Wabash, 37-38th</td>
<td>3</td>
</tr>
<tr>
<td>Olive, 37-38th</td>
<td>2.9</td>
</tr>
<tr>
<td>Park, 37-38th</td>
<td>3.2</td>
</tr>
<tr>
<td>Brooklyn, 37-38th</td>
<td>3</td>
</tr>
</tbody>
</table>

**Natural Surveillance:** The assessment, block-by-block, evaluated the overall condition of the residential doorways that open to outside and how well they are lit; how visible the front doors are from the street; and whether landscaping creates blind spots or hiding spots. Lighting: The majority of the front doors are visible throughout the neighborhood area, protected by porches. The majority of the blocks, 70% of the blocks, have landscaping that creates blind spots or hiding spots. Natural surveillance increases the perceived risk of attempting deviant actions by improving visibility of potential offenders to the general public. Natural surveillance occurs by designing the placement of physical features, activities and people in such a way as to maximize visibility of the space and its users, fostering positive social interaction among legitimate users of private and public space. Potential offenders feel increased scrutiny, and thus inherently perceive an increase in risk.

**Territorial Reinforcement:** The assessment, block-by-block, evaluated the overall condition of how the property lines are defined and encourage interactions with plantings, fences, short walls; and whether the street address is visible from the street with numbers. Approximately 60% of the blocks have majority property line definition with either plantings, fences or short walls. Natural access control could be improved in some of these areas as it limits the opportunity for crime by taking steps to clearly differentiate between public space and private space. By selectively placing entrances and exits, fencing, lighting and landscape to limit access or control flow, natural access control occurs.

**Maintenance and Green Space:** The assessment, block-by-block, evaluated the overall condition of the structures; the general condition of landscaping and whether old automobiles and other vehicles exist in the yards. About 60% of the blocks were evaluated with having painted structures and generally in a ‘good repair’ condition. A bit more to evaluate: Maintenance is an expression of ownership of property. Deterioration indicates less control by the intended users of a site and indicate a greater tolerance of disorder. The “Broken Windows Theory” is a valuable tool in understanding the importance of maintenance in deterring crime. Broken Windows theory proponents support a zero tolerance approach to property maintenance, observing that the presence of a broken window will entice vandals to break more windows in the vicinity.
IVANHOE NEIGHBORHOOD: ACTIVE LIVING

Date: March 6th, 2018

Identifying Active Living in Neighborhoods

This neighborhood audit tool assess street-level characteristics that may be related to walking and bicycling. The instrument places emphasis on measuring the walkability of the neighborhood with an understanding of the impact of cars upon that experience. Increasing physical activity is a powerful way to prevent obesity and promote health among children and adults. Across the country, practitioners, advocates and policy-makers are coming together to create healthier communities that support active lifestyles. Children and families are more active when they live in neighborhoods that have sidewalks, parks, bicycle lanes and safe streets.

We analyzed the survey results through “Health Community Audit Instrument” and arrived at a four-point scale system:

<table>
<thead>
<tr>
<th>Walking and Bicycling Amenities</th>
<th>3.7</th>
<th>3.5-4.0</th>
<th>most favorable conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Garfield, 38-39th</td>
<td>3.4</td>
<td>3.0-3.4</td>
<td></td>
</tr>
<tr>
<td>Brooklyn, 38-39th</td>
<td>2.4</td>
<td>2.5-2.9</td>
<td></td>
</tr>
<tr>
<td>East 38th Terrace (off of Brooklyn)</td>
<td>1.5</td>
<td>1.0-2.4</td>
<td>least favorable conditions</td>
</tr>
<tr>
<td>Park, 38-39th</td>
<td>3.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Olive, 38-39th</td>
<td>3.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wabash, 38-39th</td>
<td>3.4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wabash, 37-38th</td>
<td>2.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Olive, 37-38th</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Park, 37-38th</td>
<td>3.3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brooklyn, 37-38th</td>
<td>2.5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Walking and Bicycling Amenities: The assessment, block-by-block, evaluated the overall condition of the presence of sidewalks, their buffer space between the street and the sidewalk, the condition of the sidewalks, shade trees and public lighting. The majority of the streets in this area had sidewalks along both sides of the entire streets — while there is question about what will happen regarding sidewalks on either sides along Wabash Avenue between 37th and 38th Streets — as the Church develops their parking lot/landscaping areas. The majority of the streets have 2’-6’ of buffers along the sidewalks, but only 30% of the streets have shade trees in this buffer zone. Shade trees and plant material offer aesthetic, environmental, social and economic benefits to cities. Most importantly, trees create a comfortable pedestrian environment. While 30% of the streets have ‘excellent/good’ sidewalk conditions, 70% have ‘poor/dangerous’ sidewalk conditions. Sidewalks should be free from cracks, heaving and spalling sidewalks should be replaced. Sidewalks that are in unacceptable condition should be reported to the city. In many cases cracked or heaving sidewalks are present in front of vacant or abandoned properties.

Road Characteristics: The assessment, block-by-block, evaluated the overall condition of the car speed limit, the presence of a shoulder or bike lane and on-street parking. In general, it was unclear what the speed limit for cars was because rarely was there a sign posted on these blocks. Cars traveled at a higher speed along 39th Street making pedestrians feel most vulnerable. Throughout the study area, there were no bike lanes and on-street parking was allowed on both sides of the street. During this audit, we did not see any bicyclists.
Characterizing Neighborhood Property in Health Research

Over the last couple of decades, studies have been developed to explore the impact of community characteristics on the physical and mental health of residents to better understand population health and health disparities. Direct observation of neighborhood characteristics using an audit instrument relies on more objective measurement to capture many of the comprehensive and detailed environmental characteristics relevant for health.

We analyzed the survey results through “Health Community Audit Instrument” and arrived at a four-point scale system:

<table>
<thead>
<tr>
<th>Garfield, 38-39th</th>
<th>3.5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brooklyn, 38-39th</td>
<td>3.3</td>
</tr>
<tr>
<td>East 38th Terrace [off of Brooklyn]</td>
<td>2.8</td>
</tr>
<tr>
<td>Park, 38-39th</td>
<td>2.7</td>
</tr>
<tr>
<td>Olive, 38-39th</td>
<td>2.8</td>
</tr>
<tr>
<td>Wabash, 38-39th</td>
<td>3.1</td>
</tr>
<tr>
<td>Wabash, 37-38th</td>
<td>2.4</td>
</tr>
<tr>
<td>Olive, 37-38th</td>
<td>2.9</td>
</tr>
<tr>
<td>Park, 37-38th</td>
<td>2.8</td>
</tr>
<tr>
<td>Brooklyn, 37-38th</td>
<td>2.5</td>
</tr>
<tr>
<td>3.5-4.0</td>
<td>most favorable conditions</td>
</tr>
<tr>
<td>3.0-3.4</td>
<td></td>
</tr>
<tr>
<td>2.5-2.9</td>
<td></td>
</tr>
<tr>
<td>1.0-2.4</td>
<td>least favorable conditions</td>
</tr>
</tbody>
</table>

Residential Land Use: The assessment, block-by-block, evaluated the overall condition of the residential units; presence of porches, borders (fences, shrubs, etc.); boarded, burned or abandoned residential units; and presence of visible security warning signs. There are vacant or abandoned buildings within the selected area where 60% of the blocks had at least one vacant building. In most cases, these properties have been closed and secured and are in various states of disrepair. It has been found in other cities that when several of these properties are clustered together, it tends to attract criminal activity. Most houses, 90% of the blocks, had porches and the presence of borders which positively defines property territories that serves to protect private property, while also playing an important role in image and the aesthetic of the street. The most common type of fence used throughout the neighborhood is chain-link fence. Chain-link, while functional and affordable, provides a harsh, uninviting aesthetic. Ornamental fencing that is a maximum of 4-feet in height should be encouraged. In some cases, landscape hedges were used which are a softer, more aesthetic way to define the front yard. Hedges should be kept no taller than 30” in height to maintain clear sight lines and eliminate hiding places.

Public, Residential, Non-Residential Spaces / Aesthetics: The assessment, block-by-block, evaluated the general condition of public spaces; visibly active people; overall conditions of parks and playgrounds; visible dogs, and litter. There are significant numbers of vacant or abandoned properties through this area, where in some blocks, there are more empty lots than there are houses, ranging from 40% to 70% empty lots in the blocks. While many lots are mowed and seemingly cared for, there are some where trash has collected, overgrowth is happening, and it needs to be better maintained. Vacant lots can be re-purposed for a variety of community based uses. By allowing community members or groups to adopt these lots, a space that was previously a blight problem could be transformed into a vibrant community asset. On this cool Spring day, there were not many visible people out and there are no parks or playgrounds in this area. There were some dogs on leashes and in fenced in areas, but no stray dogs. Overall, there was little litter and no visible graffiti. However, there were stacks of abandoned tires throughout the area and according to a person we spoke to, they have been there for a long while. Removing these tires and finding a way to address this dumping problem would benefit the overall appearance of this area.
PURPOSE AND SCOPE

As part of the Community Engagement process, Dotte Agency worked with neighbors to identify and make visible existing community development investments (physical and programmatic), health assets and ‘problem areas’ through mapping. Large scale maps were then created highlighting areas of previous investment as reported by residents as well as areas for improvement. Priority geographic focus areas were identified and outlined on the map to help direct future change efforts and interventions to improve community health. These maps help to tell the neighborhood’s ‘health story’ and can be a valuable resource in community problem solving. Each map is laminated and includes space for additional comments and data points for future engagement.

In addition, Dotte Agency worked with Assistant Professor Dr. Hui Cai to create ‘cross maps’ to delve deeper into the data and showcase relationships between neighborhood assets.

The goal of mapping is to highlight differences between the needs and the available resources within the community. We have combined key themes such as housing, schools, healthcare, recreation, retails and other community services with the vulnerable populations such as low income households, single-mom, elderly, and poor elderly, family with kids etc. The data we mapped included but were not limited to:

1. Demographics (e.g., age, gender, race/ethnicity, education)
2. Poverty and unemployment
3. Food Resources (e.g., Grocery stores, Corner stores, Farmers’ markets, Cultural food stores)
4. Other retail
5. Recreation (e.g., parks, recreation, fitness center, gyms, Public trails, bikeways)
6. Healthcare (e.g., clinic, hospital, and nursing home)
7. Education (e.g. schools and daycares)
8. Community services (e.g. library, daycare, community center, church)
9. Housing characteristics (e.g., age of houses, house vacancy, rental availability, housing)
10. Land use (e.g., residential zoning, non-residential zoning, land bank, vacant lots)
11. Transportation (e.g., sidewalk, trail, car ownership, bus routes, stops, other public transit)

Methods

The study is developed in three phases (Figure 1):

Phase 1: Acquiring and organizing secondary data. The geospatial data comes from various sources, for instance, Geographical boundary shapes and some demographics
For instance, the northwest corner of Douglass-Sumner and the south east corner of Downtown KCK have been identified as areas with high rate of low-income households and low availability of available rental units. When we overlay the population density with the concentration of houses that were built before 1939, it again showed the southeast corner of downtown KCK as a targeted area to improve. The third overlay maps showed that area has 45% of vacant housing, which demonstrated the mismatch between the types of houses that are available and the needs of the low-income population.

On the KCMO side, the center of Scarritt Renaissance was shown as an area with higher concentration of low income household and low availability of rentals. It has also high population density and relatively high percentage of houses that were built before 1939. The area on the west side and to the east side of Ivanhoe has demonstrated as area that has relatively high concentration of low income household and older structures, and the vacancy is low, which indicates the needs for additional housing. While the middle of the Blue Hills showed potential for adaptive reuse or renovations as there is a misfit between available houses and people with needs.

Detailed Community Development Asset Maps can be found in Appendix D.
Kansas City LISC

Neighborhood Pride Evaluation

*Project Synopsis*

Prepared by Success Measures\textsuperscript{®} at NeighborWorks\textsuperscript{®} America

August 2017
INTRODUCTION

Over a period of time, Kansas City (KC) LISC has been investing in five communities with the goal of increasing neighborhood pride. In September 2016, KC LISC began working with Success Measures at NeighborWorks America, to help them and five of their community-based partners plan and implement an outcome evaluation on resident quality of life and community pride in these communities. Success Measures supported LISC and its partners to:

- Design the evaluation process, including selecting data collection tools;
- Create a data collection implementation plan;
- Provide technical assistance to implement the evaluation;
- Prepare baseline evaluation reports;
- Review the evaluation process and plan for next steps.

This report summarizes the planning, implementation, and findings of this evaluation project which ran from September 2016 through June 2017. More details about project activities and timeline can be found at the end of the report on page 11.

PLANNING

The evaluation effort began with an in-person planning session in Kansas City. Success Measures facilitated a conversation for LISC staff to articulate their definition of “neighborhood pride” and the indicators of pride. Sessions with staff from each of the five neighborhood groups were held so they could review and refine those indicators for their specific neighborhood.

The identified indicators of neighborhood pride among residents included the following:

- Satisfaction with the neighborhood;
- Willingness to recommend the neighborhood as a good place to live
- Feeling safe in the neighborhood;
- Strong sense of place, feeling connected to others in neighborhood, and counting on others for help;
- Participation in community initiatives, getting involved, having a voice;
- Positive perception of physical conditions in neighborhood, cleanliness, condition of streets and sidewalks, public spaces and the homes;
- Confidence that the neighborhood is improving
- Access to public services, businesses and services, cultural/art/music events, food choices

The next step was to identify questions from the Success Measures library to serve as a common set used across organizations to measure those indicators. (See the core survey questions starting on page 12.) In addition, each organization had the opportunity to add custom questions of special interest to their particular organization.
Representatives from each of the five neighborhood groups were interviewed to articulate their unique goals. In addition, each group defined the neighborhood boundaries where they would survey the residents and identified the necessary strategies and resources to administer the survey successfully.

LISC and its partners hoped that the baseline data would be used by the neighborhood organizations to build community support for next steps, identify potential areas of focus, develop partnerships and leverage the information to secure additional resources for program implementation. The expectation is that the resident survey will be repeated in three years and will reveal evidence of progress toward increasing neighborhood pride.

**METHODOLOGY**

The survey was conducted using a random sample of households in each neighborhood; sizes of the neighborhoods ranged from 250 to 3,500 households. Each group hoped to obtain a minimum of 200 completed surveys from selected residents. These factors would ensure that the results were representative of the entire neighborhood. (Using this approach the results would have a 90% confidence level (with 5% +/- interval) of being representative of the perceptions of the entire neighborhood.)

LISC staff secured lists of residential addresses for each neighborhood so that a random sample of addresses for each neighborhood’s data collection could be generated.

The groups employed multiple data collection strategies, including going door-to-door to administer the survey in person, sending the survey via email, mailing paper copies of the survey, inviting specific households to a convening to complete the survey, and connecting with selected residents at community events.

Staff received training and technical assistance to conduct the survey, including strategies for recruiting and training data collectors, publicizing the survey effort and steps for entering the responses into the Success Measures Data System (SMDS). The participating groups had access to all of the Success Measures resources available on the Evaluation Learning Center, a repository of evaluation materials, how-to’s and templates. In addition, identified leads from each community, as well as the LISC project manager, received ongoing technical assistance and support from Success Measures.

The original timeline, which had targeted December 2016 for data collected completion, was deemed too ambitious and was deferred to May 2017.

**IMPLEMENTATION**

Neighborhood groups found it very challenging to conduct the survey using a random sampling method and to obtain the required number of completed surveys.

Downtown Shareholders was able to implement the survey following the random sample. They obtained 95 responses. While that did not meet their goal, the information is useful and representative (at a 70% confidence level and a margin of error of +/- 5%).
Using a variety of methods to obtain responses, Blue Hills Community Services collected 179 survey responses and Ivanhoe Neighborhood Council collected 105 responses. Several of the groups created a hyperlink to the evaluation on SMDS which they posted on their website and/or Facebook page. Several used the email function on SMDS to send the survey to interested neighborhood residents. While the responses are not representative, the information provides both LISC and the organizations with useful information.

Mattie Rhodes Center and Douglas Sumner Neighborhood Association collected 21 and 20 responses respectively, making the information of limited value.

<table>
<thead>
<tr>
<th>Organization</th>
<th>Household count</th>
<th>Number of surveys collected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blue Hills Community Services</td>
<td>3093</td>
<td>179</td>
</tr>
<tr>
<td>Ivanhoe Neighborhood Council</td>
<td>2711</td>
<td>105</td>
</tr>
<tr>
<td>Downtown Shareholders</td>
<td>826</td>
<td>95</td>
</tr>
<tr>
<td>Mattie Rhodes Center</td>
<td>1758</td>
<td>21</td>
</tr>
<tr>
<td>Douglas Sumner Neighborhood Association</td>
<td>240</td>
<td>20</td>
</tr>
</tbody>
</table>

Conducting a sample was an ambitious undertaking given that none of the groups had prior experience doing this type of evaluation effort. Several of the organizations were in favor of the sample survey approach because they believed their strong connections to residents would make the survey effort less burdensome. However, groups underestimated the effort it would take and, in retrospect, believe it would have been better to select another strategy. It is also possible that not all groups were ready for this approach and that a tailored approach for each organization, rather than a common methodology for all five groups, might have been more successful.
FINDINGS

Three of the neighborhoods secured a sizable number of responses by June 1: Blue Hills, Ivanhoe and Downtown Shareholders. Although none of them secured sufficient number of responses for a 90% confidence level with a 5% margin of error, there is still much that can be observed in the data that indicate possible neighborhood direction on the question of pride and connectivity and can assist the organizations and KC LISC in considering future program actions.

The following are some of the key questions and findings with detailed data from this evaluation.

General Background and Neighborhood Satisfaction

How long have you lived in this neighborhood?

- All three neighborhoods saw a range of answers among respondents to the question of how long they have lived in the neighborhood.

<table>
<thead>
<tr>
<th></th>
<th>Blue Hills</th>
<th>Ivanhoe</th>
<th>Downtown Shareholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 1 year</td>
<td>11%</td>
<td>10%</td>
<td>12%</td>
</tr>
<tr>
<td>1-5 years</td>
<td>26%</td>
<td>18%</td>
<td>35%</td>
</tr>
<tr>
<td>6-10 years</td>
<td>11%</td>
<td>11%</td>
<td>26%</td>
</tr>
<tr>
<td>11-20 years</td>
<td>16%</td>
<td>11%</td>
<td>9%</td>
</tr>
<tr>
<td>21-30 years</td>
<td>10%</td>
<td>9%</td>
<td>1%</td>
</tr>
<tr>
<td>&gt;30 years</td>
<td>26%</td>
<td>40%</td>
<td>17%</td>
</tr>
</tbody>
</table>

Overall, considering everything, how satisfied would you say you are living in this community?

- When asked about their level of satisfaction with the neighborhood, a majority of respondents indicated they are either “Satisfied” or “Very satisfied”. [Blue Hills=51%, Ivanhoe= 65%, Downtown Shareholders=54%]

<table>
<thead>
<tr>
<th></th>
<th>Blue Hills</th>
<th>Ivanhoe</th>
<th>Downtown Shareholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very satisfied</td>
<td>23%</td>
<td>25%</td>
<td>19%</td>
</tr>
<tr>
<td>Satisfied</td>
<td>28%</td>
<td>40%</td>
<td>35%</td>
</tr>
<tr>
<td>Somewhat satisfied</td>
<td>31%</td>
<td>22%</td>
<td>21%</td>
</tr>
<tr>
<td>Somewhat dissatisfied</td>
<td>12%</td>
<td>7%</td>
<td>13%</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>3%</td>
<td>2%</td>
<td>3%</td>
</tr>
<tr>
<td>Very dissatisfied</td>
<td>3%</td>
<td>4%</td>
<td>9%</td>
</tr>
</tbody>
</table>
KC LISC believes that in a neighborhood exhibiting strong pride residents would rate as Good or Very Good the cleanliness, physical conditions, safety and friendliness.

How would you rate each of the following aspects of this neighborhood?

- Of the factors, friendliness received high ratings across the organizations.
- The physical conditions of the neighborhood generally received lower ratings than safety and friendliness. In Blue Hills and Ivanhoe physical conditions and cleanliness received relatively low ratings. Respondents from Downtown Shareholders rated the physical conditions slightly higher.

<table>
<thead>
<tr>
<th>% indicates those responding “Good” and “Very good”</th>
<th>Blue Hills</th>
<th>Ivanhoe</th>
<th>Downtown Shareholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cleanliness of the neighborhood</td>
<td>31%</td>
<td>42%</td>
<td>42%</td>
</tr>
<tr>
<td>Physical conditions of the houses</td>
<td>28%</td>
<td>29%</td>
<td>43%</td>
</tr>
<tr>
<td>Physical condition of the streets, sidewalks and public spaces</td>
<td>30%</td>
<td>36%</td>
<td>38%</td>
</tr>
<tr>
<td>Safety in the neighborhood</td>
<td>40%</td>
<td>55%</td>
<td>41%</td>
</tr>
<tr>
<td>Friendliness of their neighborhoods</td>
<td>63%</td>
<td>78%</td>
<td>48%</td>
</tr>
</tbody>
</table>

How likely are you to recommend this community to someone else as a good place to live?

- In all three neighborhoods, most respondents indicated either “Definitely would recommend” or “Probably would recommend” their neighborhood as a good place to live. [Blue Hills=70%, Ivanhoe=81%, Downtown Shareholders=75%]

<table>
<thead>
<tr>
<th></th>
<th>Blue Hills</th>
<th>Ivanhoe</th>
<th>Downtown Shareholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely would recommend</td>
<td>28%</td>
<td>29%</td>
<td>27%</td>
</tr>
<tr>
<td>Probably would recommend</td>
<td>42%</td>
<td>52%</td>
<td>48%</td>
</tr>
<tr>
<td>Probably would not recommend</td>
<td>23%</td>
<td>11%</td>
<td>16%</td>
</tr>
<tr>
<td>Definitely would not recommend</td>
<td>6%</td>
<td>8%</td>
<td>10%</td>
</tr>
</tbody>
</table>

If you had the choice, would you continue to live in this neighborhood?

- In all three neighborhoods the vast majority of respondent indicated that they would continue to live in the neighborhood if they had a choice.

<table>
<thead>
<tr>
<th></th>
<th>Blue Hills</th>
<th>Ivanhoe</th>
<th>Downtown Shareholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>69%</td>
<td>84%</td>
<td>68%</td>
</tr>
<tr>
<td>No</td>
<td>31%</td>
<td>16%</td>
<td>32%</td>
</tr>
</tbody>
</table>
Sense of Safety

How safe would you say you feel in each of the following places?

In all three of the neighborhoods the majority of respondents reported feeling “Very safe” or “Safe” during the day; the percentage of residents feeling safe walking in their neighborhood at night was much lower.

<table>
<thead>
<tr>
<th>% indicates those responding “Very safe” and “Safe”</th>
<th>Blue Hills</th>
<th>Ivanhoe</th>
<th>Downtown Shareholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Walking in neighborhood during day</td>
<td>67%</td>
<td>76%</td>
<td>74%</td>
</tr>
<tr>
<td>Walking in neighborhood at night</td>
<td>21%</td>
<td>43%</td>
<td>35%</td>
</tr>
</tbody>
</table>

Connection Among Neighbors and Resident Engagement

Another indicator identified by KC LISC for neighborhood pride are strong connections among residents. The survey included questions asking residents whether they feel connected with the neighborhood, whether they believe that residents can count on each other when they need help, and whether they are willing to become involved in the neighborhood working with others. Another question identified five situations and asked residents how likely it would be that others would help in each of the situations.

How likely would you say it is that people in your community would help out if the following occurred?

The results from this question suggest that neighbors in Blue Hills and Ivanhoe can count on one another. It is noteworthy that more than 50% of Ivanhoe respondents selected “Very likely” in all five situations.
Right now, how willing are you to become involved in your neighborhood by working with others to make things happen?

- In each organization the majority (59% - 66%) of respondents indicated that they were either “Very willing” or “Willing” to work with others to make things happen.

<table>
<thead>
<tr>
<th></th>
<th>Blue Hills</th>
<th>Ivanhoe</th>
<th>Downtown Shareholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very willing</td>
<td>25%</td>
<td>23%</td>
<td>32%</td>
</tr>
<tr>
<td>Willing</td>
<td>37%</td>
<td>43%</td>
<td>27%</td>
</tr>
<tr>
<td>Somewhat willing</td>
<td>29%</td>
<td>27%</td>
<td>21%</td>
</tr>
<tr>
<td>Not that willing</td>
<td>9%</td>
<td>7%</td>
<td>20%</td>
</tr>
</tbody>
</table>

How much of a positive difference do you feel that you, yourself, can make in your community?

- Across the organizations respondents reported that they could have a positive different in their community.

<table>
<thead>
<tr>
<th></th>
<th>Blue Hills</th>
<th>Ivanhoe</th>
<th>Downtown Shareholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>A great deal</td>
<td>25%</td>
<td>34%</td>
<td>37%</td>
</tr>
<tr>
<td>A fair amount</td>
<td>42%</td>
<td>38%</td>
<td>27%</td>
</tr>
<tr>
<td>Some</td>
<td>26%</td>
<td>23%</td>
<td>18%</td>
</tr>
<tr>
<td>A little or none</td>
<td>8%</td>
<td>5%</td>
<td>18%</td>
</tr>
</tbody>
</table>

How connected would you say feel in this neighborhood?

- Across the organizations, most respondents indicated they felt connected to their neighborhood. 44% of respondents in Blue Hills, 68% of respondents in Ivanhoe and 53% of respondents in Downtown Shareholders indicated they feel “Very Connected” or “Connected”.
- 50% of Ivanhoe respondents reported they feel “Very connected”.

<table>
<thead>
<tr>
<th></th>
<th>Blue Hills</th>
<th>Ivanhoe</th>
<th>Downtown Shareholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very connected</td>
<td>21%</td>
<td>50%</td>
<td>26%</td>
</tr>
<tr>
<td>Connected</td>
<td>23%</td>
<td>18%</td>
<td>27%</td>
</tr>
<tr>
<td>Somewhat connected</td>
<td>34%</td>
<td>21%</td>
<td>23%</td>
</tr>
<tr>
<td>Not very connected</td>
<td>14%</td>
<td>6%</td>
<td>15%</td>
</tr>
<tr>
<td>Not at all connected</td>
<td>7%</td>
<td>5%</td>
<td>10%</td>
</tr>
</tbody>
</table>
Overall, considering everything, how much do you feel that people in your neighborhood can count on each other when they need help?

- People in these neighborhoods reported they could count on each other for help.
- 56% of respondents from Blue Hills, 78% of respondents from Ivanhoe and 48% of respondents from Downtown Shareholders indicated they could count on each other “A great deal” or “A fair amount”.
- 39% of respondents in Ivanhoe indicated that people could count on their neighbors “A great deal”.

<table>
<thead>
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</tr>
</thead>
<tbody>
<tr>
<td>A great deal</td>
<td>21%</td>
<td>39%</td>
<td>19%</td>
</tr>
<tr>
<td>A fair amount</td>
<td>35%</td>
<td>39%</td>
<td>29%</td>
</tr>
<tr>
<td>A little</td>
<td>33%</td>
<td>15%</td>
<td>34%</td>
</tr>
<tr>
<td>Not at all</td>
<td>11%</td>
<td>8%</td>
<td>18%</td>
</tr>
</tbody>
</table>

**Perception of Neighborhood Change**

Compared to three years ago, how would you say your community has changed overall?

- 40% of respondents in Blue Hills, 56% of respondents in Ivanhoe and 46% of respondents in Downtown Shareholders reported that their neighborhood had “Improved a lot” or “Improved some” in the past three years. Across the three neighborhoods, 30-39% of respondents indicated “Stayed about the same”.

<table>
<thead>
<tr>
<th></th>
<th>Blue Hills</th>
<th>Ivanhoe</th>
<th>Downtown Shareholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improved a lot</td>
<td>11%</td>
<td>22%</td>
<td>11%</td>
</tr>
<tr>
<td>Improved some</td>
<td>29%</td>
<td>34%</td>
<td>35%</td>
</tr>
<tr>
<td>Stayed about the same</td>
<td>39%</td>
<td>30%</td>
<td>32%</td>
</tr>
<tr>
<td>Declined some</td>
<td>10%</td>
<td>8%</td>
<td>13%</td>
</tr>
<tr>
<td>Declined a lot</td>
<td>11%</td>
<td>7%</td>
<td>10%</td>
</tr>
</tbody>
</table>

Thinking about the next three years, how would you say your community is likely to change?

- In all three neighborhoods a high percentage of residents expressed confidence that the neighborhood would improve in the next three years.
- 62% of respondents in Blue Hills, 68% of Ivanhoe and 59% of Downtown Shareholders indicated they thought the community would “Improve a lot” or “Improve some”.

<table>
<thead>
<tr>
<th></th>
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<th>Ivanhoe</th>
<th>Downtown Shareholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improve a lot</td>
<td>16%</td>
<td>29%</td>
<td>13%</td>
</tr>
<tr>
<td>Improve some</td>
<td>46%</td>
<td>39%</td>
<td>46%</td>
</tr>
<tr>
<td>Stay about the same</td>
<td>30%</td>
<td>28%</td>
<td>31%</td>
</tr>
<tr>
<td>---------------------</td>
<td>-----</td>
<td>-----</td>
<td>-----</td>
</tr>
<tr>
<td>Decline some</td>
<td>4%</td>
<td>5%</td>
<td>6%</td>
</tr>
<tr>
<td>Decline a lot</td>
<td>5%</td>
<td>0%</td>
<td>5%</td>
</tr>
</tbody>
</table>

CONCLUSION

Kansas City LISC and their partners decided to implement a community survey, which was an ambitious undertaking. A great deal of effort went into the evaluation, which proved more challenging than anticipated. However, after reviewing their individual results at the conclusion of the process, staff from Blue Hills Community Services, Ivanhoe Neighborhood Council and Downtown Shareholders believed that the survey had provided them with useful information about the current level of neighborhood pride and engagement.

Discussions took place with the groups and with LISC program staff about how the organizations can share their results during neighborhood meetings to see if other residents who did not respond to the survey have similar perceptions. By sharing the results of this data collection with their neighborhood, listening further, and showing residents that the organization respects the input of all residents, future data collection will likely be more successful and easier to implement with a broader participation rate across all populations in the neighborhood.

The survey results, while not representative, provide insight into the perceptions of many people in the three neighborhoods. The results suggest that there is a lot to build on in each community.

Although the findings are not representative of the neighborhoods, it is encouraging to know that so many people feel connected to their neighbors, feel that their community has improved and expressed confidence that it will improve in the future. A majority of respondents in each community expressed a willingness to work with other in the community. People generally feel their neighbors are friendly. The vast majority of respondents indicated they would continue to live in their neighborhood if they have the choice. These and others are all aspects of community pride.

The information collected through this evaluation can be built upon through further outreach and conversation to neighborhood residents. The results can be helpful as a starting point for building programs and strategies to strengthen the neighborhoods. The hope is that the organizations will use the results in program planning and find ways to gather more resident input and engage in further conversation.
Resident Pride, Social Capital, and Community Health:

An analysis and findings by the Kansas City, Missouri, Health Department

The following is a letter from Dr. Sarah Martin, Deputy Director at the Kansas City, Missouri, Health Department:

The Kansas City, Missouri Health Department is committed to redefining the city’s definition of health — the majority of what predicts a person’s length and quality of life is not found in a doctor’s exam room or in our DNA. The most powerful predictor of how long someone will live, and what that life will be like, is where they live.

Neighborhoods are shaped by economic and political forces. As a government agency, the Health Department recognizes that it is our responsibility to understand the consequences of both our historical policies and the decades of failure to reverse those policies. This is why our organization believes that measurement of neighborhood level indicators of well-being is critical to defining success.

The city is focusing on the measurement of Social Capital — the foundational aspects that build a community. Social Capital is the glue that holds neighbors together — it is a function of trust, civic participation, and fellowship. A healthy community is one that is connected, where people look out for each other. A healthy community is also cohesive, a place where residents see themselves as a part of something bigger than just their household; it is a feeling of a powerful identification with the neighborhood.

Partnering with LISC and the Dotte Agency, the Health Department analyzed measures of Social Capital and feelings of safety to identify neighborhood-level predictors of cohesiveness and connectedness in multiple neighborhoods on both sides of the state line. We used straightforward multivariate regression techniques to assess the statistical significance of neighborhood services and amenities, as well as respondent demographics, in predicting our outcomes. We only present findings with low odds of being a random relationship — any association with a greater than 5% probability of being due to chance is not included here.

We present the findings for three neighborhoods below: Blue Hills (KCMO), Ivanhoe (KCMO) and Downtown Shareholders (KCK). The findings are a reminder that the way we develop our cities has significant influence on the wellness of our residents.

What predicts overall levels of satisfaction with a neighborhood?

We explored what neighborhood and individual level characteristics related to a respondents general satisfaction with where they live, focusing on potential determinants with implications for public policy. With so much of our public conversation centering on the benefits of home ownership, interestingly enough renters and homeowners expressed similar patterns of satisfaction.
For all types of residents in Ivanhoe, for instance, cleanliness; affordability; parks; grocery shopping and appropriateness for senior citizens were all significant, positive predictors of satisfaction. All of these predictors are in part a function of government policies relating to blight, housing, infrastructure, density and budgeting. We must ask ourselves as policymakers: are our budget priorities reflective of what actually satisfies our residents and improves their quality of life?

In Blue Hills, we found that the most positive predictor of overall satisfaction was a respondents perception of neighbor friendliness. While government intervention on friendliness might seem strange, it does present a policy opportunity to create more spaces for interaction, support community building and ensure that our community anchors (such as playgrounds, community centers, pools and gardens) are safe, clean places to be.

In Downtown KCK, it was more difficult to tease out consistent patterns of attitudes. As in the other neighborhoods, satisfaction and feelings of safety, cohesion and connectedness were positively correlated. However, neighborhood amenities and perceptions of quality services were not predictive of satisfaction among the respondents — the responses from this group were highly variable, and priorities were not consistent. This illuminates the challenge of governing diverse, integrated communities.

**What predicts feelings of safety in a neighborhood?**

Feelings of safety are a crucial component of a healthy life; chronic stress and anxiety weakens immune responses and increases the risk of poor mental health. Children who don’t feel safe have a hard time getting enough sleep and concentrating in the classroom. The health and social implications for neighborhoods experiencing high levels of trauma should drive our policy choices and programmatic goals. The last year in the Kansas City region was a troubling one — in KCMO we experienced one of the most violent years on record. Intimate partner violence and assaults due to arguments are on the rise on both sides of the state line. Across all neighborhoods, female respondents were much less likely to feel safe than male respondents, regardless of age. That safety and gender connection was amplified if the respondent had children in the household.

There were many positive predictors of safety across all three neighborhoods that can inform policy and budgeting priorities. In KCK, the higher a respondent rated the quality of emergency services (the Fire Department and Ambulance), the safer they felt. While this aligns with standard budgeting prioritization of public safety, what is most interesting is that satisfaction with the quality of parks, playgrounds, community centers and restaurants was equally predictive of feelings of safety. This finding should urge policy makers to consider the emphasis on “public safety” more holistically.

While satisfaction with emergency services did not significantly predict feelings of safety in Blue Hills and Ivanhoe, there were findings that should be of interest to local policy makers. Once again, perception of friendliness mattered to respondents in both neighborhoods, as did the perception that the neighborhood was a “good value for the price”. In addition, street cleanliness and quality; satisfaction with parks and playgrounds and access to high quality child care were also positively correlated with the likelihood of feeling safe. This underscores the importance — as we saw with the KCK results — of expanding our conventional definition of public safety to include the neighborhood qualities that enhance a community.

**What are the determinants of cohesion and connectedness?**

Across our neighborhoods, the idea of cohesion (seeing oneself as part of a larger community identity) was more predictive of feelings of satisfaction and safety than the idea of connectedness (seeing oneself as a part of a network of neighbors). In addition to the recurring themes in the rest of the analysis — satisfaction with parks, neighborhood cleanliness and neighbor friendliness — a powerful concept emerges when focusing on Social Capital: agency. Agency is defined in this analysis as the perception that if something is wrong in a neighborhood, the community will come together to try and fix it. The concept of agency was not predictive of the other outcomes, but was significantly positively associated with both connection and cohesion in Blue Hills and Ivanhoe. This connection stresses the importance of civic engagement in assessing community health. When neighbors work together to affect change in their communities, it not only leads to improvements in that community, it can lead to actual improved health for the residents who participate. Research shows a strong
biological connection between participation in civic or faith based groups and improved mental and physical health. Cities and other organizations need to prioritize meaningful, innovative community engagement.

Cities can also improve Social Capital by providing spaces for communities to connect. In Downtown KCK, respondents overwhelmingly expressed that access to something as simple as a coffee shop or lunch restaurant improved feelings of cohesion. This is a striking lesson for those with influence on development decisions. Even small changes to a neighborhood through the incentivizing of certain businesses can have meaningful effects on Social Capital.

**Conclusion**

Determinants of why people choose to stay or leave a neighborhood, and what they do for that neighborhood while they live in it, are complicated. And yet, there are clear patterns across these three neighborhoods that show:

*People care about community spaces:* Parks, playgrounds, community centers, restaurants and coffee shops. Neighborhoods can not feel integrated without welcoming, safe places to connect.

*Looks do matter.* Cleanliness, sanitation and infrastructure repair is connected to overall feelings of safety, connection and satisfaction. Healthy, peaceful neighborhoods begin with attention to environmental design, public works and code enforcement. Recent research from the Health Department shows that neighborhoods in KCMO with high Social Capital have fewer code enforcement complaints, even when controlling for median income or age of housing stock.

*Engagement needs to evolve:* The traditional models of community engagement are being replaced with innovative ways of meeting neighborhoods where they are at. When neighborhoods have agency and residents feel as if their time and energy spent on civic participation matters, the payoff in terms of Social Capital can be huge.

The Health Department is proud to partner with government agencies, non-profit organizations, the business community and foundations across the region to shift the public narrative around health. This short analysis provides a window into what is possible when we collectively define health in broader terms. We look forward to expanding on this research and working alongside our local elected officials to implement a policy platform focused on increasing Social Capital and feelings of safety while contributing to neighborhood stability.

Dr. Sarah Martin, **Deputy Director at the Kansas City, Missouri, Health Department**
LISC Neighborhood Audit

Residential Land Use

1. Subjective Assessment: Is the street walkable?
   Notes: □ Strongly Agree □ Agree □ Disagree □ Strongly Disagree
   2. Number of residential units per block? ______
   Notes:
   3. Types of residential housing?
      Notes: □ Single family □ Multi-family □ Mobile homes □ HUD □ New-renovation
   4. Overall condition of most residential units?
      Notes: □ Excellent □ Good □ Fair □ Poor / Deteriorated □ Cannot see
   5. Type of most front yards?
      Notes: □ None □ Traditional lawn □ Landscaped □ Heavily wooded □ Mixed
   6. Presence of porches?
      Notes: □ None □ Less than half □ Half □ More than half
   7. Presence of borders? (Fences, shrubs, etc.)
      Notes: □ None □ Less than half □ Half □ More than half
   8. Presence of visible security warning signs?
      Notes: □ None □ Less than half □ Half □ More than half
   9. Any boarded up, burned, or abandoned residential units?
      Notes: □ Yes □ No

Public, Residential, Non-Residential Spaces | Aesthetics

10. Presence of land is vacant or underdeveloped?
    Notes: □ None □ Less than half □ Half □ More than half
   11. Overall condition of land is vacant or underdeveloped?
       Notes: □ Excellent □ Good □ Fair □ Poor / Deteriorated □ Cannot see

Notes:

Neighborhood/Block: Date:

Public, Residential, Non-Residential Spaces | Aesthetics Cont.

12. General condition of public spaces
    Notes: □ Excellent □ Good □ Fair □ Poor / Deteriorated □ Mixed
   13. Visible people
       Notes: □ None □ Children □ Youth □ Adults
   14. People are physically active?
       Notes: □ No □ Yes, children □ Yes, youth □ Yes, adults
   15. Public neighborhood park or playground in segment?
       Notes: □ No □ Yes, park □ Yes, playground □ Yes, church park and/or playground
   16. Overall condition of park and/or playground
       Notes: □ Excellent □ Good □ Fair □ Poor / Deteriorated □ Mixed
   17. Visible Dogs
       Notes: □ No □ Yes, dog is leashed □ Yes, dog is out loose
   18. Litter | Amount
       Notes: □ None □ Little amount □ Moderate amount □ Considerable amount
   19. Litter | Type
       Notes: □ Non-alcoholic cans □ Alcoholic cans □ Large items | tires, furniture, appliances
   20. Graffiti | Amount
       Notes: □ None □ Little amount □ Moderate amount □ Considerable amount

Notes:

Transit | Walking and Bicycling Amenities

21. Presence of sidewalk
    Notes: □ None □ one | entire street □ one | partial street □ Both | entire street □ Both | entire street
   22. Presence of sidewalk buffer
       Notes: □ None □ Within 2’ of street □ Between 2’-6’ of street □ Greater than 6’ of
### LISC Neighborhood Audit

#### Transit | Walking and Bicycling Amenities Cont.

<table>
<thead>
<tr>
<th>Question</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>23. Sidewalk condition</td>
<td>□ Excellent □ Good □ Fair □ Poor / Deteriorated □ Dangerous</td>
</tr>
<tr>
<td>24. Trees shading walking area</td>
<td>□ No trees □ Some trees □ Continuous trees</td>
</tr>
<tr>
<td>25. Public Lighting</td>
<td>□ None □ Road oriented □ Pedestrian oriented □ Pedestrian and road oriented</td>
</tr>
</tbody>
</table>

#### Transit | Road Characteristics

<table>
<thead>
<tr>
<th>Question</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>26. Speed Limit</td>
<td></td>
</tr>
<tr>
<td>27. Presence of a shoulder or bike lane</td>
<td>□ None □ Yes</td>
</tr>
<tr>
<td>28. On-street parking</td>
<td>□ Not allowed □ Allowed □ Restricted □ Allowed □ No restrictions</td>
</tr>
</tbody>
</table>

#### Safety | Territorial Reinforcement

<table>
<thead>
<tr>
<th>Question</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>32. Propertylines are defined with plantings, fences, short walls</td>
<td>□ None □ Less than half □ Half □ More than half</td>
</tr>
<tr>
<td>33. Property encourages interation with low fences, bushes, landscaping</td>
<td>□ None □ Less than half □ Half □ More than half</td>
</tr>
<tr>
<td>34. Street address is visible from street with numbers (5&quot; High, Min.)</td>
<td>□ None □ Less than half □ Half □ More than half</td>
</tr>
</tbody>
</table>

#### Safety | Natural Surveillance

<table>
<thead>
<tr>
<th>Question</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>29. All doorways that open to outside are well lit</td>
<td>□ None □ Less than half □ Half □ More than half</td>
</tr>
<tr>
<td>30. Front doors are visible from the street</td>
<td>□ None □ Less than half □ Half □ More than half</td>
</tr>
<tr>
<td>31. Landscaping creates blind spots or hiding spots</td>
<td>□ None □ Less than half □ Half □ More than half</td>
</tr>
</tbody>
</table>

#### Safety | Maintenance and Greenspace

<table>
<thead>
<tr>
<th>Question</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>35. Structures painted and in condition of good repair</td>
<td>□ None □ Less than half □ Half □ More than half</td>
</tr>
<tr>
<td>36. Weeds abate, trim bushes to 36&quot; high and trees up 7' above ground</td>
<td>□ None □ Less than half □ Half □ More than half</td>
</tr>
<tr>
<td>37. Old automobiles, boats, trailers, and other vehicles in the front yard</td>
<td>□ None □ Less than half □ Half □ More than half</td>
</tr>
<tr>
<td>38. Landscaping maintained in good condition</td>
<td>□ None □ Less than half □ Half □ More than half</td>
</tr>
</tbody>
</table>

#### General Notes:
Neighborhood Maps

RIGHT: Each neighborhood will receive laminated copies of a Large Neighborhood Map, that are approximately 4’ wide by 5’ to 6’ long.

Each Large Neighborhood Map was stitched together using Google Earth images that present the neighborhood in high-resolution.

Notes that are added came from residents during the Spatial Mapping exercise done by Dotte Agency in the Community Engagement process.

The maps are laminated, and are intended to be living tools that neighborhood leaders and community organizers can use together to highlight areas of opportunity and investment.
Church Density x Kids

Ivanhoe Neighborhood

Greatest kid population within lowest density of churches

KCMO Church
Type
- Church
- Historic Church

KCMO Church
Density
- 0 - 15
- 16 - 31
- 32 - 46
- 47 - 61
- 62 - 77

KCMO_Demo_Kid02
Kid_Pop
- 24 - 88
- 89 - 157
- 158 - 226
- 227 - 352
- 353 - 485
Church Density x Seniors x Poverty

Greatest number of seniors over 65 in poverty within lowest density of churches

Ivanhoe Neighborhood

KCMOChurch Density
0 - 15
16 - 31
32 - 46
47 - 61
62 - 77

Senior over 65
8 - 42
43 - 80
81 - 116
117 - 166
167 - 267

KCMO_Poverty_65+
1 Dot = 0.08
Families x Recreation

Ivanhoe Neighborhood

Greatest number families with children without parks, recreation, and fitness facilities

KCMO Fitness
- KCMO Recreation
- KCMO Parks

KCMO_FamilywithChildren
Married Couple with Kids
- 9 - 60
- 61 - 117
- 118 - 181
- 182 - 263
- 264 - 423
Appendix D: Community Development Asset Maps

Kids x Recreation
Single Mothers x Retail

KCMO Single Mothers

- KCMO Shopping
- KCMO Grocery

Legend:
- 0 - 30
- 31 - 71
- 72 - 125
- 126 - 225
- 226 - 387

Miles

Distance:
- 0
- 0.150.3
- 0.6
- 0.9
- 1.2
Single Mothers x Healthcare

KCMO Hospital
KCMO Clinics

KCMO_Single_Mothers

Number
- 0 - 30
- 31 - 71
- 72 - 125
- 126 - 225
- 226 - 387
Families x Schools

Appendix D: Community Development Asset Maps
Appendix D: Community Development Asset Maps

Rental Units x Seniors in Poverty

KCMO_Poverty_Household 65+
1 Dot = 0.1
- Poverty_65+_Past12M
KCMO_Rental Units Availability
Vacant for rent
- 0 - 7
- 8 - 19
- 20 - 30
- 31 - 54
- 55 - 95

Miles
0 0.150 0.3 0.6 0.9 1.2
Appendix D: Community Development Asset Maps

Age of Homes x Seniors in Poverty

KCMO_Poverty_Household 65+
- 1 Dot = 0.1
- Poverty_65+_Past12M

KCMO_Demo_Low_income_Hous
- 1 Dot = 0.01
- Percent

Medium Year Structure Built
- 1939 - 1942
- 1943 - 1949
- 1950 - 1956
- 1957 - 1966
- 1967 - 1990